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REPORT OF THE EXECUTIVE DIRECTOR

SUMMARY

The present document provides an overview of developments in UNICEF programmes and operations in 1991. In contrast to reports issued in previous years, the present report does not contain a separate chapter on external relations activities. Instead, the sections describing the supporting activities of the various external relations divisions have been integrated into the programme overview. Similarly, instead of including a separate section on inter-agency cooperation, descriptions of such activities have been integrated throughout the text.

Chapter I reviews progress achieved in child survival, development and protection through major fields of activity, including primary health care, nutrition, water supply and sanitation, basic education and emergency operations. Major strategic components of UNICEF activity in 1991, such as achieving the goals for children in the 1990s and the Convention on the Rights of the Child, are also discussed in chapter I, as well as other programme responses and supporting activities. Chapter II focuses on UNICEF operations, including finances and financial management, human resources management, supply operations, administrative management, information resources management and internal audit.

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INTRODUCTION

1. The year 1991, the first year of the decade of the 1990s, witnessed efforts to lay the groundwork for moving forward effectively towards the decade goals for children and to maintain the momentum generated by the articulation of a global vision at the World Summit for Children, while sustaining the gains made in the 1980s. This was in response to Executive Board decision 1991/10 (E/ICEF/1991/15), in which the Board urged all States and other members of the international community to work for the achievement of the goals and objectives endorsed in the World Declaration on the Survival, Protection and Development of Children and the Plan of Action as an integral part of their national plans and international cooperation.

2. More than 100 countries, both developing and industrialized, are making major efforts to prepare national programmes of action for children for the decade as urged in the World Summit Plan of Action. The national programmes of action have the potential of becoming the overall framework for guiding action and mobilizing energies and resources, both at national and international levels, as well as of translating the goals and visions for the decade into reality. The challenge for UNICEF and others concerned with children is to support effectively the process of refining and elaborating such national programmes of action, establishing methods and mechanisms to make them operational, unleashing the power of people to help themselves and reviewing and assessing progress towards the promise for the year 2000.

I. PROGRAMME OVERVIEW

3. In 1991, UNICEF cooperated in programmes in 127 countries, the majority of which were in Africa (44), followed by Latin America and the Caribbean (35), Asia (34) and the Middle East and North Africa (14). The emphasis on Africa has continued, with priority also given to the least developed countries (LDCs) in this region and elsewhere. While the increasing global trend of democratization has encouraged UNICEF efforts in assisting capacity-building and strengthening primary health care (PHC) systems to make them more responsive to the needs of children and women, heavy debt burdens, adverse economic conditions, adjustment programmes that were undertaken "without a human face" and the increased frequency of both natural and man-made emergency situations, such as drought, war and famine, remain serious obstacles to child survival and development (CSD) activities. The process of political change was also accompanied by periods of political uncertainty and instability in many countries.

4. The year 1990 witnessed the remarkable achievement of the target of 80 per cent coverage of universal child immunization (UCI) globally. The historic achievement of UCI and its significance as a building block for successes on a broader front of goals for children in the 1990s culminated in a ceremony at United Nations Headquarters on 8 October 1991. The challenge now is to maintain and improve this coverage level, while at the same time

supporting other interventions to strengthen and enhance basic health infrastructures and services in order to broaden the scope of interventions and to increase access for the poorest segments of communities. The efficacy of oral rehydration therapy (ORT), combined with large-scale community mobilization, was highlighted during the cholera epidemic in the Latin America region, in which the case fatality rate was kept to unprecedentedly low levels. Because of the successes in immunization and ORT efforts, acute respiratory infections (ARI) have now moved to the forefront as the principal killers of infants and children. The situation of women and children with regard to the acquired immune deficiency syndrome (AIDS) pandemic has continued to deteriorate, without any sign of improvement in the immediate future.

5. Other highlights of the year include political commitments made to the achievement of micronutrient goals and the high visibility given to activities to support, protect and promote breast-feeding, with the "baby-friendly" hospital intitative as a cutting edge. World-wide mobilization for basic education has continued, while the ongoing evolution of integrating water supply and sanitation programmes more fully with health interventions underlined the need to establish much stronger intersectoral linkages and to increase the use of social mobilization in all sectors.

A. Programme expenditure

6. Programme expenditure in 1991 totalled $591 million ($318 million from general resources and $273 million from supplementary funds). This was distributed among different programme fields as shown in table 1 below. Two additional tables have been provided this year: table 2 on "UNICEF general resources programme expenditure by programme field" and table 4 on "UNICEF 1991 programme expenditure on emergency and rehabilitation by programme field".

7. As the figures indicate, health remains the largest sector in UNICEF expenditure, although it has been reduced both numerically and proportionately. Expenditure incurred on immunization was 17 per cent. Total expenditure in water supply and sanitation decreased (owing largely to the underfunding of supplementary-funded water supply projects, which decreased from $48 million in 1990 to $42 million in 1991). However, expenditure for 1991 was dominated by a substantial increase for emergencies, from $49 million in 1990 to $111 million, owing to the situation between Iraq and Kuwait and other crises, especially in Africa.

8. Programme expenditure on emergency and rehabilitation, as shown in table 4, is distributed between health ($43 million), water supply and sanitation ($20 million), nutrition ($9 million) and children in especially difficult circumstances ($10 million). If these figures are combined, programme expenditures in health, nutrition and water supply and sanitation have increased substantially. The only field that registered a decrease, both numerically and proportionately, was education. Efforts are now being made to retain and possibly increase the share of expenditure on education, while

maintaining the quality and standards of educational inputs to country programmes. The share of programme expenditure on women across all sectors stabilized, as in previous years, at around 31 per cent. The programme database is also being improved so that programme expenditure in urban areas can be reported in future years.

9. The geographical distribution of programme expenditure is shown in table 5. Expenditure in 1991 was skewed by the large emergency expenditure in the Middle East, although it should be noted that Africa is now the region receiving the largest allocation.

Table 1. Total UNICEF programme expenditure by programme field

(In millions of United States dollars)

Programme	1970-1979 a/ Amount	%	1988 Amount	%	1989 Amount	%	1990 Amount	%	1991 Amount	%
Child health	31	34	158	40	203	40	251	43	202	34
Expanded programme on immunization			(84)	(21)	(114)	(23)	(150)	(25)	(98)	(17)
Oral rehydration therapy			(7)	(2)	(12)	(2)	(9)	(2)	(9)	(1)
Other health			(67)	(17)	(77)	(15)	(92)	(16)	(95)	(16)
Nutrition and household food security	9	10	23	6	28	6	29	5	31	5
Water supply and sanitation	16	17	69	17	76	15	82	14	73	12
Education b/	20	22	37	9	37	7	57	10	48	8
Other programme areas c/	5	5	29	7	35	7	41	7	39	7
Emergency	4	5	32	8	48	10	49	8	111	19
Planning advocacy and programme support d/	6	7	52	13	74	15	75	13	87	15
Total UNICEF programme expenditure	91	100	400	100	501	100	584	100	591	100

a/ Annual average.

b/ Figures for 1990 and 1991 include young child development programmes.

c/ Consists of community development and organization, women's programmes and children in especially difficult circumstances.

d/ Consists mainly of advocacy, planning and social statistics, and programme support.

Table 2. UNICEF general resources programme expenditure by programme field

(In millions of United States dollars)

Programme	1988 Amount	%	1989 Amount	%	1990 Amount	%	1991 Amount	%
Child health	64	34	95	38	128	40	119	38
Expanded programme on immunization	(28)	(15)	(44)	(18)	(67)	(21)	(56)	(8)
Oral rehydration therapy	(5)	(3)	(8)	(3)	(6)	(2)	(6)	(2)
Other health	(31)	(16)	(43)	(17)	(55)	(17)	(57)	(18)
Nutrition and household food security	11	6	14	6	16	5	21	6
Water supply and sanitation	23	2	31	12	34	10	31	10
Education a/	26	14	29	11	47	15	35	11
Other programme areas b/	21	11	25	10	25	8	23	7
Emergency	4	2	3	1	8	3	16	5
Planning advocacy and programme support c/	41	21	54	22	61	19	73	23
Total UNICEF programme expenditure from general resources funding	190	100	251	100	318	100	317	100

a/ Figures for 1990 and 1991 include young child development programmes.

b/ Consists of community development and organization, women's programmes and children in especially difficult circumstances.

c/ Consists mainly of advocacy, planning and social statistics, and programme support.

Table 3. UNICEF supplementary funding programme expenditure by programme field

(In millions of United States dollars)

Programme	1988 Amount	%	1989 Amount	%	1990 Amount	%	1991 Amount	%
Child health	94	45	108	43	122	46	83	30
Expanded programme on immunization	(56)	(27)	(70)	(28)	(82)	(31)	(42)	(15)
Oral rehydration therapy	(2)	(1)	(4)	(2)	(3)	(1)	(3)	(1)
Other health	(36)	(17)	(34)	(13)	(37)	(14)	(38)	(14)
Nutrition and household food security	12	6	14	6	13	5	10	4
Water supply and sanitation	46	22	45	18	48	18	42	15
Education a/	11	5	8	3	10	4	13	5
Other programme areas b/	8	4	10	4	16	6	16	6
Emergency	28	13	45	18	41	16	95	35
Planning advocacy and programme support c/	11	5	20	8	14	5	14	5
Total UNICEF programme expenditure from supplementary funding	210	100	250	100	265	100	273	100

a/ Figures for 1990 and 1991 include young child development programmes.

b/ Consists of community development and organization, women's programmes and children in especially difficult circumstances.

c/ Consists mainly of advocacy, planning and social statistics, and programme support.

Table 4. UNICEF 1991 programme expenditure on emergency and rehabilitation by programme field

(In thousands of United States dollars)

Expanded programme in immunization	12 379
Other health	31 201
Total, health	43 580
Nutrition	9 846
Household food security	3 898
Water supply and sanitation	20 046
Education	2 817
Other programme areas:	
Community organization/development	1 020
Women's programmes	484
Children in especially difficult circumstances	10 579
Planning advocacy and programme support	15 566
Not distributed	2 890
Grand total	100 726

Table 5. UNICEF programme expenditure by geographical region

(In millions of United States dollars)

Region	1970-1979 a/ Amount	%	1988 Amount	%	1989 Amount	%	1990 Amount	%	1991 Amount	%
Africa	19	21	146	36	170	34	216	37	210	36
Asia	52	57	167	42	204	41	233	40	200	34
Americas and the Caribbean	8	9	37	9	52	10	58	10	61	10
Middle East and North Africa	10	11	38	10	61	12	47	10	90	15
Central and Eastern Europe									3	1
Interregional	2	2	12	3	14	3	20	3	27	4
Total	91	100	400	100	501	100	584	100	591	100

a/ Annual average.

B. Major strategic components

Achieving the goals for children in the 1990s

10. In 1991, UNICEF field offices in all developing countries were actively involved in supporting Governments and non-governmental organizations (NGOs) in the follow-up to the World Summit for Children in support of the goals and strategies for children in the 1990s adopted by the Executive Board (E/ICEF/1990/13, decision 1990/2). Most countries are engaged in major efforts to prepare national programmes of action, as recommended in the Summit Plan of Action, encompassing reviews of national goals for children, consideration of resources and the development of strategies and mechanisms for achieving national goals. In many countries, UNICEF joined other relevant United Nations agencies and interested donors to advise and assist Governments in such preparations or reviews. Much of UNICEF work in this regard was carried out as a synergistic extension of support to the normal UNICEF country programme. Feedback from field offices suggests that in all countries the impetus provided by the high-level political commitment for the follow-up to the Summit has had a positive impact on programme implementation and acceleration.

11. Many National Committees for UNICEF have also been active in the follow-up to the World Summit for Children in industrialized countries. Through inter-agency government bodies or other means, some of those countries have undertaken reviews of the situation of their children in relation to the Summit goals, as well as of the impact of their development assistance programmes on those goals. In addition to providing guidance and support to field offices and National Committees, UNICEF headquarters and regional offices have also been active in mobilizing the support of intergovernmental organizations, NGOs, donor agencies and organizations for Summit follow-up (see also document E/ICEF/1992/12).

Monitoring the decade goals for children

12. The Plan of Action adopted at the World Summit for Children underlines the importance of monitoring progress towards the Summit goals during the 1990s. The year 1991 saw increased work on the identification of indicators for monitoring progress, the delineation of methods of measurement and a considerable expansion of data-related activities, including the examination of existing data and the feasibility of using new indicators. In general, the development of monitoring activities within countries is at an early stage since such activities need to be integrated with the national programmes of action of each country. On the other hand, data for monitoring the situation of children have become an increasingly important part of country programmes, and many field offices have considerable experience on which to draw for Summit goal-monitoring activities.

13. Joint work with other United Nations agencies is also expanding. UNICEF/World Health Organization (WHO) collaboration on monitoring immunization is now being broadened to include diarrhoeal diseases, ARI and

related health indicators. New breast-feeding indicators and measurement methods have been developed in collaboration with WHO and the Demographic and Health Surveys Organization. Support from UNICEF and the United Nations Population Fund (UNFPA) has enabled WHO to update information on maternal mortality, and monitoring methods for use in the field are being refined and documented. A joint project with WHO to monitor access to safe water supplies and appropriate sanitation facilities is providing training and equipment to countries for the development of their own reporting systems, and several countries have already begun to apply the system and have provided information for 1990. Joint work with the United Nations Educational, Scientific and Cultural Organization (UNESCO), the World Bank and the United Nations Development Programme (UNDP) is concentrating on filling gaps and reducing weaknesses in data for monitoring progress on education-related goals since the data currently available are primarily administrative in nature and weakest for the non-formal sectors. That joint effort is also focusing on the development of broader-based learning achievement indicators for in-country use, a necessarily longer-term development.

14. From the early stages of developing goals, it has been recognized that helping countries to build their own monitoring capacities must be a joint effort, not only with the country institutions, but also with international organizations. One example of collaborative work is provided by the Inter-agency Monitoring Group involving UNFPA, UNICEF and the United Nations Statistical Office, and which was joined by UNDP within the last year. Five country missions (to Ecuador, Kenya, Mali, Mexico and the Philippines) were carried out in 1991 to assess production and use of data related to monitoring human development. The findings of those missions will help substantially in the development of guidelines for assessing the monitoring situation in other countries. Other agencies, including WHO and UNESCO, have also made inputs into the work of the Inter-agency Monitoring Group.

15. The year 1992 should see further progress in the area of goal monitoring, including clarification of national monitoring requirements and related gaps and weaknesses; substantial steps towards strengthening country capacity; improvements in reporting systems and databases; and appropriate revision of existing procedures and outputs so as to support improved goal monitoring at all levels.

Convention on the Rights of the Child

16. Pursuant to Executive Board decisions 1990/10 (E/ICEF/1990/13) and 1991/9 (E/ICEF/1991/15), UNICEF continued to work actively throughout 1991 to facilitate early ratification of the Convention on the Rights of the Child and to support its effective implementation. The process of integrating the issues and principles of the Convention into the UNICEF country programming process also continued. By the end of 1991, 107 countries had become States parties to the Convention through ratification or accession, while another 35 had signed, indicating their intention to ratify the Convention. The number and speed of ratifications are unprecedented in the history of human rights

conventions and have been accompanied by national, subregional and regional public mobilization actions for children involving community leaders, parliamentarians, religious leaders, the media, young people and children themselves.

17. The Convention's most fundamental impact on UNICEF has been to broaden the framework for analysing the situation of children and to stimulate new thinking about effective strategies for UNICEF to fulfil its mandate. Because of the complementarity of the Convention and the goals set by the World Summit for Children, the Convention's principles can now be transformed into practical action at the country level that can be measured in terms of progress towards quantifiable targets set by the Summit. Follow-up actions to the Summit are also given an added impetus by the Convention, which has made the provision of basic services for children national obligations that give meaning to their rights. Country programme recommendations being submitted to the 1992 Executive Board demonstrate that all new UNICEF programmes of cooperation specifically use the Convention and the Summit goals as their normative and strategic framework, and that UNICEF programmes of cooperation support government efforts to implement the Convention and to achieve the Summit goals. Revised guidelines for country situation analyses have been issued so that issues raised by the Convention can be integrated systematically into those analyses. To ensure that the principles of the Convention are reflected in all UNICEF work, relevant activities are also reviewed by the interdivisional Consultative Group on Child Rights.

18. Some UNICEF offices already have considerable experience in working with concepts of children's rights. Some country-level examples are documented in a report issued by the International Child Development Centre (ICDC), entitled "The Convention: Child rights and UNICEF experience at the country level". Those examples show that the Convention's concepts are integrated into all aspects of UNICEF programming and are not separate from mainstream UNICEF activities. For example, in Bolivia, children's rights are promoted as a major part of advocacy for children, while the Convention permeates all aspects of UNICEF activities, forming the framework for analysis and the standard against which objectives are set and achievements measured. In Kenya, the Convention has helped to set goals for children within the framework of the national development plan; through comparison of the provisions of the Convention with Kenyan legislation, appropriate programme responses have been defined more easily. In Brazil, constitutional and legislative reforms are being applied through policy and institutional changes, which in turn result in direct benefits for children. UNICEF played a major role in the campaign to link the children's rights movement to the drafting of the new constitution, and the preparation of the situation analysis of children in Brazil became a process that underpins the movement for legal and institutional reform. In Egypt, UNICEF was able to generate interest among Islamic scholars on the place of children with regard to the teachings of the Koran and Hadith texts. This led to the publication of "Child Care in Islam" as a framework for application of the Convention in Islamic societies.

19. For countries facing economic decline or stagnation, particularly LDCs, experience has shown that adherence to the Convention means that legislation and reforms must be undertaken at a sustainable pace in order to address the most pressing needs of children first. On the other hand, in countries such as Thailand, where UNICEF cooperation has moved beyond the provision of basic services and the immediate goals of survival and development, problems of social and economic disparity and marginalization may pose the greatest threat to children's rights. Therefore, the UNICEF country programme of cooperation in Thailand addresses the exploitation of children and youth, emphasizing the prevention of prostitution and the spread of AIDS. Linking children's rights to women's rights is also an essential part of the process. Situation analyses now routinely examine the role and status of women and the gender disparity between boys and girls. In Bolivia, the campaign to generate political support for the ratification of the Convention also led to ratification of the Convention on the Elimination of All Forms of Discrimination against Women.

20. During the past year, legislative reviews of children's rights and public information activities on the implementation of the Convention were supported by field offices and National Committees for UNICEF. New partnerships were formed to monitor the implementation of the Convention, and many country offices have already initiated training exercises with local partners. In addition, the UNICEF Training Section is now preparing the first staff training package on children's rights. UNICEF has continued inter-agency cooperation on the Convention, particularly with the United Nations Centre for Human Rights. The Committee on the Rights of the Child, composed of 10 independent experts and with a mandate to monitor implementation of the Convention, was elected in February 1991. The Committee held its first formal session in October 1991; UNICEF representatives, as well as those from other agencies and NGOs, attended the session. In May 1991, UNICEF sponsored an informal consultation for the Committee, which initiated an ongoing dialogue between the Committee and United Nations agencies.

Development with a human face

21. The past year witnessed further acceptance not only of the concept of adjustment, but also of development with a human face. A global consensus has emerged that human development and poverty alleviation are key development issues for the 1990s, as indicated by the International Development Strategy for the Fourth United Nations Development Decade, the World Bank's World Development Report for 1990 and 1991, the 1990 and 1991 Human Development Report and the State of the World's Children report. It is now accepted that in order for development to be sustainable, structural adjustment should be a broad-based strategy that pays due attention to human development and the needs of the poor. It requires a mix of appropriate and complementary social and economic policies and conscious efforts to mitigate any negative impact of fiscal and monetary policies on the poorest groups in society. The challenge now facing UNICEF and the international community is to ensure that these declarations of intent become practical policies of support and action at the country level.

22. The human development country initiative, sponsored jointly by UNDP, UNICEF and the United Nations Office at Vienna, has been instrumental in assisting several interested Governments to prepare development plans and analyses focusing on priority human concerns. These analyses address, inter alia, budgetary allocation priorities and processes. In several instances, the initiative has provided a broad framework for the preparation of national programmes of action. In Pakistan, for example, the Government has requested that UNICEF, UNDP and the World Bank provide contributions to the eighth five-year plan, beginning in 1993, on social actions and budgetary reforms required to achieve the Summit and other human development goals by the year 2000. Special emphasis will be placed on providing the poorest 30 per cent of the population with basic services, on the reallocation of budget expenditures to basic services and on the increased efficiency of service delivery.

23. UNICEF is also collaborating with UNDP and the Development Assistance Committee of the Organisation of Economic Cooperation and Development (OECD) in examining the methodology for analysing development aid allocation for human priority concerns, with the purpose of drawing the attention of decision makers to areas where there is room for improvement. Creative dialogue on macroeconomic issues and policies has continued with other international agencies, including the World Bank, the International Monetary Fund (IMF), WHO and the agencies represented in the Joint Consultative Group on Policy (JCGP) (UNICEF, UNDP, UNFPA, the World Food Programme (WFP) and the International Fund for Agricultural Development (IFAD)). Following discussions of the Pan American Health Organization (PAHO) evaluation of social emergency and investment funds in Latin America and the Caribbean, a project was initiated with PAHO to study the impact of the debt crisis and adjustment processes on policy-making with respect to social planning in the region.

24. In September 1991, UNICEF and the International Labour Organisation (ILO) jointly sponsored an international workshop at Santiago on poverty monitoring by international agencies. The workshop brought together various participants and experts on poverty issues from the academic community, the World Bank, the UNDP regional project to alleviate poverty, the Economic Commission for Latin America and the Caribbean (ECLAC), the Government of Chile and UNICEF offices in the region. It focused on operational steps that international agencies need to take to support political commitment and to facilitate the implementation of policies addressing poverty. As a further response to the operationalization of concerns about poverty, UNICEF also participated in a World Bank review of its Handbook on Poverty in November 1991.

25. In Eastern Africa, the regional network on adjustment continues to facilitate exchanges of experience so as to increase in-house capacity to deal with adjustment-related issues. Many UNICEF country offices are involved in advocacy on such issues by raising public awareness of the situation of children during times of economic austerity, by commissioning studies on the specific impact of economic changes on children and by participating in reviews of economic recovery programmes, as for example in Ghana, the United Republic of Tanzania and Zimbabwe.

26. Third world debt remains a substantial obstacle to CSD activities in many middle- and low-income countries, especially in sub-Saharan Africa. UNICEF has continued to pursue its initiative on debt relief for children in order to reduce the debt burden of selected countries and, at the same time, to generate additional social sector expenditures. Under this programme, commercial bank debt is either donated to UNICEF or purchased at a discount in secondary markets by National Committees for UNICEF. The debt is then swapped for local currency payments by debtor Governments to finance UNICEF supplementary-funded programmes. This exchange, in terms of local currency support for country action, creates a substantial multiplier, while reducing outstanding debt obligations. UNICEF is also consulting with creditor and debtor Governments on the possibility of using local currency obtained through official debt conversion for social sector programmes under arrangements recently agreed to by the Paris Club. The additional resources thus obtained are potentially very large and well-suited to funding programmes developed as a follow-up to the World Summit for Children.

Reaching the poorest

27. During 1991, UNICEF continued efforts to improve the involvement of the poorest segments of communities in programme activities and, in accordance with Executive Board decision 1991/6 (E/ICEF/1991/15), to identify, analyse and share information and lessons learned from initiatives that were most effective in reaching the poorest children and their families. The major impetus behind this effort has been the development of country-level goals for children in the 1990s as follow-up to the World Summit for Children. The aim of substantially improving the conditions of children and women and the need to go-to-scale to reach national and universal coverage have generated increased awareness of the need to identify and reach the poorest and unreached groups. As a result, there have been efforts to reduce both disparities and the physical and social distances that prevent poorer groups from gaining access to services. Critical to those efforts are programme strategies in social sectors that address the needs of the poor, rather than indiscriminate planning of services that end up serving better-off groups. Emphasis is being placed on ensuring that social safety nets are developed or maintained in order to protect the poorest, especially in situations where structural adjustment measures and the application of market principles are adversely affecting social services. To achieve those goals, key strategies for the effective expansion of social services include decentralized approaches within a framework of partnership among central and local governments, communities, voluntary organizations and the private sector; participation of all segments of the population; and the empowerment of even the most vulnerable groups with relevant knowledge and information.

28. Specific data on the poorest segments of the population remain limited. Overall income distribution is likely to have worsened in recent years. The 1991 World Development Report shows that in most developing countries with an already low income base, the lowest 40 per cent of the population earn well under 10 per cent, and in many cases under 5 per cent, of total national income. There are other dimensions of poverty, such as vulnerability to

seasonal fluctuations in income, disease, malnutrition and access to health, education, water supply and other basic services that make the poorest groups far more vulnerable than income statistics alone indicate.

29. The situation of the poorest has been affected both positively and negatively by events during the past year. The global movement towards democratization and decentralization has tended to strengthen local communities and helped to raise political awareness of critical problems affecting the poorest. Within the United Nations system, a main focus of attention on the poorest has been provided by the International Development Strategy for the Fourth United Nations Development Decade. Implementation of the strategy requires the promotion of human development and the alleviation of critical poverty. Specific programme achievements have led to improvements in the health and well-being of the poorest. For example, UCI has brought about substantial reductions in infant and child morbidity and mortality, even among the poorer segments of society, and has helped to extend health systems into remote areas. As former United States President James Earl Carter said during the ceremony at United Nations Headquarters on 8 October 1991 to mark the achievement of UCI, "advanced science and technology had been put at the service of the poorest and those in the most remote places for the first time".

30. Constraints continue to exist at both the macro and micro levels, however. Economic retrenchment and adjustment programmes have generally had negative effects on the poorest, at least for the short term. In many cases, those groups are not working in the formal sector and are already receiving few benefits from government services. In addition, overall production has declined and prices have increased, preventing the poorest from advancing. In many parts of the world, access-related constraints in areas affected by armed conflict, natural disasters and famine continued and often worsened in 1991 (see also the report on UNICEF emergency operations, E/ICEF/1992/11).

31. UNICEF efforts have centred on support for the preparation of national programmes of action, which requires addressing the needs of the poorest groups in order to achieve the goals for the 1990s. That emphasis has been coupled with the continuing development of community-based strategies in nutrition, education, water supply and health, directed at access for the poorest groups. In UNICEF-supported, area-based programmes, special attention is given to choosing impoverished areas with very low social and economic indicators.

32. Many of the field activities described in other sections of the present report illustrate UNICEF efforts to reach the poorest groups. For example, in the United Republic of Tanzania, the community-based programme strategy is aimed at promoting the awareness and involvement of villages and local governments. Child survival activities are coupled with income-generation and village-level actions to contribute to overall poverty reduction. Women are generally among the poorest and underserved, and programmes on women in development are also effective instruments for reaching the poorest. Under the Bamako Initiative, activities are under way in 33 countries to expand access to health services, raise participation and ensure the affordability of

health services. Urban services programmes have traditionally focused on poor communities, where deliberate efforts have been made to reach and involve the most disadvantaged sections of those populations. In the education sector, non-formal programmes, including literacy and vocational training for working children and street children, are aimed at reaching the poorest groups. In developing monitoring systems for water supply and sanitation services, the disaggregation of data for urban slums is helping to redirect policies in that area. Programmes for children in especially difficult circumstances naturally focus on disadvantaged groups such as displaced persons in situations of armed conflict.

33. The global economic and political situation continues to limit prospects for improving the situation of the poorest. Therefore, there will be continuing emphasis on reaching the poorest and most disadvantaged groups through advocacy at all levels, through collaboration with other agencies, especially JCGP, and through the country-level programmes of UNICEF. Improved identification of the most vulnerable members of the population, the promotion of national attention to the needs of the poor, universalization of programmes for child survival, protection and development and subnational programming targeted at excluded groups will continue to receive attention.

Least developed countries

34. Pursuant to Executive Board decision 1991/4 (E/ICEF/1991/15), UNICEF continued to give high priority to children and women in LDCs. In 1991, the situation of LDCs continued to deteriorate, with declining commodity prices, increasing external debt, growing ecological damage and a stagnating development process. Over the last 20 years, the number of countries falling into the LDC category increased from 24 to 41. Economic and social indicators demonstrate a wide gap between this group and other developing countries. LDCs have roughly 11 per cent of the world's population, and their average per capita gross national product is $240 or less, compared with approximately $970 for all developing countries and $17,300 for industrialized market economies. During the last 25 years, LDCs experienced a decrease in their share of world exports by two thirds, from 1.5 to 0.5 per cent. In 1990, life expectancy at birth in LDCs (50.7 years) was some 12 years less than that in the rest of the developing world (62.8 years) and about 25 years less than that in industrialized countries (75 years). Adult literacy rates (36 per cent) and school enrolment ratios (41 per cent) in LDCs were considerably less than in two thirds of the developing world as a whole (60 and 70 per cent, respectively). Less than half of the total population in LDCs have access to health services (46 per cent), safe water supply (34 per cent) and sanitation (23 per cent). In rural areas, the situation is much worse (35, 27 and 17 per cent, respectively), making basic services unavailable to the majority of the population. There is a lack of basic infrastructures in LDCs, and the situation worsened in the last decade because of the recession.

35. Children represent roughly half the population in LDCs and are the weakest of all vulnerable groups. They are the first to be affected by economic cut-backs, social inequity and natural or man-made calamities. One of the clearest indicators of the impact on children is the under-five mortality rate for LDCs, which was 197 per 1,000 live births in 1988, more than double that in other developing countries (85 per 1,000 live births). Some 37 per cent of children in LDCs suffered from moderate and severe malnutrition in the period 1980-1987. According to the 1991 Human Development Report, the net primary school enrolment ratio for LDCs is also only 54 per cent, compared with 90 per cent for all developing countries. The considerable social gap between LDCs and the rest of the developing world in child-related areas has widened in recent years, reversing the trend of progress made up to the mid-1970s.

36. Two major international events in 1990 with implications for improving the situation of LDCs were the World Summit for Children and the Second United Nations Conference on the Least Developed Countries, held in Paris in September. Similar commitments were made at the two conferences for children facing poverty, disease and illiteracy. Priority tasks for strengthening human capital identified by the Programme of Action of the Paris Conference include improvement of education and training standards, with priority to universal primary education and access for girls and women to education facilities; strengthening PHC; implementation of expanded immunization programmes; control of diarrhoeal diseases (CDD); malaria control; efforts to combat AIDS; and the reduction of infant, child and maternal mortality and morbidity. Those are also commitments made at the World Summit for Children.

37. Although effective and long-term implementation of those tasks must be based on national actions in each country, they will require a substantial level of international cooperation. The multifaceted character of social problems in LDCs also requires cooperation across a broad spectrum. In this context, the goals and strategies for children in the 1990s form a vital framework for collaborative efforts for child protection and survival. In many LDCs, coordinated programmes are already under way to identify the major areas for intervention and to establish medium- and long-term targets in the context of national programmes of action.

38. As long ago as 1970, UNICEF had established specific criteria for the allocation of resources in order to provide proportionately more funds for LDCs. Within its current programme activities, UNICEF is spending more than four times as much per child in LDCs ($1.03) as it is in other developing countries ($0.22). While only about 13 per cent of all children in developing countries live in LDCs, UNICEF is now spending 41 per cent of its programme resources in those countries.

39. CSD is being promoted actively in LDCs through a combination of various strategies, including community-based approaches under the Bamako Initiative, where 12 of the countries in which it is being implemented are LDCs. Another example is the "debt relief for children" initiative; in the Sudan, UNICEF-supported activities in the water supply and sanitation sector have

been financed partly through debt-relief schemes. Other activities in LDCs have targeted, inter alia, food security, improved nutritional status of vulnerable groups, empowerment through training and the dissemination of information, in addition to strengthening national capacity for the collection, monitoring and analysis of data on women and children. In the foreseeable future, LDCs will continue to have very severe problems affecting children. UNICEF will continue to support their efforts to formulate and implement national programmes of action to benefit children on the basis of the long-term objectives adopted by the World Summit for Children and the Paris Conference.

Environment and sustainable development

40. In the past year, UNICEF has enhanced the environmental components of its activities in continued response to Executive Board decision 1989/18 (E/ICEF/1989/12). Policy guidance has also been reinforced by the Summit Plan of Action, which underscores the relationship between the environment and the fulfilment of the Summit goals. Two major factors have underlined the need to review and strengthen the UNICEF strategy for the environment: the increasing focus on environment and sustainable development, particularly in the context of preparations for the United Nations Conference on Environment and Development; and the World Summit follow-up process, which has led to the realization that the major Summit goals cannot be met without focusing attention on environmental factors. Consequently, a review of UNICEF strategy is being carried out in consultation with field offices. Various studies, including an updated version of the United Nations Environmental Programme (UNEP)/UNICEF publication, Children and the Environment, are being prepared to support advocacy and policy-making. A major constraint in both industrialized and developing countries is the perception of the environment in only physical, not human terms, especially the impact on the poor and their children at household and community levels.

41. The aim of UNICEF is to emphasize linkages between children's concerns and the environment by stressing the human development aspect of environment programmes and by advocating an approach that relates to sustainable development and the well-being of children and their families. The concept of "primary environmental care" is being promoted and supported. This concept, already embodied in community-level and community-based initiatives in many UNICEF country programmes, encompasses the provision of basic services, improvement of the environment, community participation and the empowerment of people with relevant knowledge and information.

42. The past year has also witnessed greatly increased collaboration with other United Nations agencies and NGOs and the active involvement of UNICEF in preparation for the United Nations Conference on Environment and Development (the "Earth Summit"), to be held at Rio de Janeiro, Brazil, including regional meetings and meetings of the Conference Preparatory Committee. In May 1991, UNICEF presented a paper at a symposium on "Women and Children First", sponsored by the secretariat of the Rio Conference, UNFPA and UNICEF; the symposium explored the linkages between women, children and the environment.

UNICEF also contributed to and participated in the International Conference on Water and the Environment, held at Dublin in January 1992, as well as various NGO initiatives such as the Global Assembly of Women and the Environment and the World Women's Congress, both held at Miami, Florida (United States), in November 1991, and the "Voice of the Children" campaign begun in Norway.

43. At the country level, UNICEF has continued to emphasize the mutually supporting relationship between environmental components and CSD programmes in the following ways:

(a) Recognizing that improved child survival contributes to population stabilization by accelerating the decline in fertility rates, many UNICEF country programmes are also increasingly emphasizing the family planning and safe motherhood aspects of their maternal and child health (MCH) activities, with UNFPA collaboration in some cases. Preventive aspects of health care that closely interact with the environment, such as CDD and malaria control, continue to be addressed;

(b) Environmental education activities - formal, non-formal or third channel - are being promoted in several countries. The Fenerive project in Madagascar is a particularly innovative example, as nutrition education in schools provides the entry point for a range of other activities, including reforestation and the promotion of birth spacing, thus reaching parents through their children. In Sri Lanka, a local women's NGO supported by UNICEF successfully organized a mass campaign of non-formal, environmental health education for rural women;

(c) In the area of water supply and environmental sanitation, UNICEF continues to move towards a more integrated approach based on community participation and encompassing, inter alia, drainage, vector control and sanitation activities, education and awareness-raising, protection of fresh water resources and the use of appropriate technology. In the Amazon region of Brazil, UNICEF has played a catalytic role in a community pilot project involving the decontamination of water using durable, low-cost appropriate technology. The state government of Para has now adopted this method for a large-scale potable water campaign because of its possibilities for decentralized water supply;

(d) Given the trends of rapid urbanization, urban environment issues are of increasing concern. The Baldia urban sanitation project in Pakistan, which emphasizes awareness-raising and the participation of women, and the Tegucigalpa project in Honduras, which involves disadvantaged urban populations, express UNICEF concern for the urban poor. Such examples will need to be increased greatly;

(e) Small-scale agroforestry and social forestry activities continue to be carried out in Ethiopia, Guatemala, Malawi, Mali, Nepal and the Sudan, while fuel-efficient or solar stoves are being promoted in South Asian countries;

(f) Household food security projects in many countries continue to incorporate environmental aspects such as the use of appropriate technologies, particularly for women; improved crop varieties; small-scale irrigation and vegetable gardens; and measures to restore soil fertility and improve productivity. An innovative example is a project in Botswana that supports the sustainable exploitation of indigenous plants (veld products) adapted to the harsh climate. These are processed for medicinal purposes and food production, contributing to household food security and diversification of the economy, and thus also mitigating the impact of traditional livestock production on the local ecology.

44. Programmes or projects with a more specific environmental focus have continued to be implemented. The project for nomadic pastoralists in Africa, established in 1991 in collaboration with UNDP and the United Nations Sudano-Sahelian Office and covering 14 countries, is attempting to address major problems facing pastoral groups, including environmental degradation, social marginalization and economic differentiation. The Amazon basin subregional programme is identifying and developing approaches to key issues in the region, including urban environmental problems, sustainable livelihoods, effective service delivery models and children in especially difficult circumstances. The Chile environment project focuses on environmental education, while the Central America and Panama subregional programme focuses on water supply, sanitation and environmental education. The Nepal environment project is using credit as well as non-credit groups, especially women's groups, as entry points for CSD and environmental improvement activities based on community-level needs assessment. In the coming year, an increasing emphasis on environmental education is expected, together with more programmes for children and women with a more specific environmental focus.

Africa

45. The Executive Board reaffirmed the commitment of UNICEF to Africa as the region of highest priority in decision 1991/13 (E/ICEF/1991/15). In 1991, much of sub-Saharan Africa was characterized by continuing economic decline and political uncertainty. On the political front, a number of African countries have taken bold initiatives to introduce more participatory political systems, which pose a challenge and, at the same time, provide UNICEF the opportunity to advocate on behalf of children and women among a wider range of political groups than before. The importance given to children's issues in this new situation has been reflected in several countries, as witnessed by the integration of children's and women's concerns into the new constitution in Guinea; the establishment of a new government department for children in Zambia; and the reassertion by Mali of support for the Summit Declaration. At the 1991 summit meeting of heads of State of the States members of the Organization of African Unity (OAU), African leaders reaffirmed their commitment to the goals for children in the 1990s and called for the convening of a special donors' conference on assistance to children in order to mobilize support for children through financing from domestic and external sources.

46. The African economic situation remains precarious, with external debt increasing, despite limited new loans, to an all-time high of $280 billion for the continent at the end of 1991. Despite the nascent political changes, there has been little real increase in resource flows to sub-Saharan Africa; the secretariat of the United Nations Programme of Action for African Economic Recovery and Development estimated a drop in real resource flows from $24.6 billion in 1986 to $23.3 billion in 1990. Many donors are now linking their assistance to Africa not only to the need for African Governments to undertake structural economic reforms, but also to their undertaking political reforms leading to good "governance" in an attempt to improve accountability and the effective use of resources. Given the mixed success to date of economic reform programmes, which have had as their goal the resumption of economic growth, many Governments find themselves without the internal or external resources to continue the development policies they have been pursuing. The resultant forced change in political and economic structures may create the conditions for greater accountability, but also often results in sharp reductions in the delivery of essential services to the most vulnerable.

47. The UNICEF response in Africa is prompted by the reality that Africa represents the greatest challenge to the achievement of the goals for children in the 1990s, as it is the only continent where the numbers of child deaths and the rate of child malnutrition are still increasing. Those trends, combined with the still meagre results of economic programmes, the huge proportion of children who are refugees or displaced and the large numbers of children affected by AIDS, reinforce the need for Africa to remain the region of highest UNICEF priority. A report before the 1992 Executive Board reports on progress made by UNICEF in Africa in addressing the specific needs of children and women and on new initiatives planned regarding the special concerns of the continent (E/ICEF/1992/L.4).

48. The past year was characterized by significant successes in the adoption of the Bamako Initiative strategy in national health programmes in Africa (see E/ICEF/1992/L.6), the holding of round tables to prepare the implementation of the Jomtien Declaration on Education for All and the introduction of the new nutrition strategy. While those steps will continue in 1992 and beyond, there are several regions within the continent that require significant special actions. In the Horn of Africa, the potential for reducing the number of refugee families made possible by the end of the Ethiopian civil war has been largely negated by the upsurge in fighting in Somalia. UNICEF has continued to work and has achieved important breakthroughs in Eritrea and northern Somalia, in coordination with other United Nations agencies through the Special Emergency Programme for the Horn of Africa. In the Sahel, human survival and development are at risk because of food and economic insecurity brought about by the fragile environment; environmentally sound strategies for capacity-building will thus be a UNICEF priority in that region. In South Africa, political change is evolving to end apartheid. UNICEF activities there are described in a new recommendation submitted to the Executive Board for approval (E/ICEF/1992/P/L.6).

C. Major fields of activity

Primary health care

49. UNICEF, as one of the co-sponsors of the 1978 Alma Ata International Conference on Primary Health Care, has always been committed to the concept of PHC. The rapid gains made globally in the 1980s in UCI and CDD - the twin thrusts of CSD - in the context of MCH, provide a base for the support and strengthening of national integrated health systems and structures that are essential if the health and nutrition goals for the 1990s are to be achieved. Taking into account Executive Board decision 1991/11 (E/ICEF/1991/15), specific CSD interventions have continued to build on the achievements of UCI, using its structures to revive, strengthen and support overall basic health services - a strategy identified programmatically as "UCI-plus". Many countries have committed themselves to such an integrated approach. An outstanding example is provided by India, where, using the Universal Immunization Programme (UIP) structure, a package of services for reducing deaths among children and mothers, is being implemented on a nationwide basis. While some of the interventions are provided on a nationwide scale, the precise mix of services depends on specific districts, based upon their needs and infrastructures. At the same time, district-based approaches are used to try out innovative ideas and improve the quality of health care. The entire approach has been named "UIP plus" by the Government of India.

50. Communications - as a means of empowerment as well as for the involvement of members of communities and society to improve their own well-being - made a significant contribution to the achievement of CSD successes during the 1980s. The UNICEF communication strategy is thus broader than the health education envisaged earlier and utilizes both interpersonal communications and mass media. The challenge for the 1990s will be how best to make use of the opportunities provided by different means of communications for better health and more efficient functioning of the PHC system.

51. Because many achievements in the health sector were made in an environment of austerity and hardship, concerns about sustainability have risen in both developing countries and the donor community. In order to synthesize the experience gained in recent years, a seminar held in November 1991 under the auspices of UNICEF and attended by representatives of developing countries, donor agencies, multilateral organizations (including WHO and the World Bank) and specialists, explored different aspects of sustainability with a view to integrating them into broader structures to meet the more stringent demands of the 1990s. The issues of sustainability, integration and national capacity-building of health programmes are further elaborated in a separate report to the Executive Board (E/ICEF/1992/L.7).

52. The Bamako Initiative, now operational in 33 countries, has made a major contribution towards rebuilding national health systems, especially in Africa (see also paras. 101-105 below). Its unique features of community financing, community management and national focus have established PHC structures that can be sustainable in the long run. An evaluation of the experience of five

African countries (Burundi, Guinea, Kenya, Nigeria and Uganda) has been conducted under the sponsorship of the Danish International Development Agency, the Norwegian Agency for International Development, the Swedish International Development Authority (SIDA) and the Overseas Development Administration (ODA) of the United Kingdom, and an executive summary of the evaluation, which also contains an information note by the Executive Director, will be submitted to the Executive Board for further deliberation (E/ICEF/1992/L.20).

53. UNICEF support for strengthening and enhancing PHC systems has been encouraged by the increasing global trend towards democracy, decentralization of authority and the considerable initiative of the communities concerned about organizing themselves. In this context, the Bamako Initiative is playing a significant role not only in reviving, strengthening or establishing PHC structures, but also in maintaining their functioning in countries and regions where political turmoil has shut down other government structures. Other developments, including essential drugs policies and the rationalization of management systems, stimulated by broader economic changes, have also contributed positively to the formation of a favourable framework for achieving health goals. However, severe constraints remain, including demographic changes such as rapid urbanization, as well as heavy debt burdens, adverse economic conditions and eroding health budgets.

Immunization and the Children's Vaccine Initiative

54. The achievement of the 1990 goal of UCI, covering 80 per cent of children under one year of age with all six major antigens, was certified to the United Nations Secretary-General on 8 October 1991 at United Nations Headquarters by the WHO Director-General and the Executive Director of UNICEF, in the presence of dignitaries from many countries. This achievement, made against adverse socio-economic conditions, had immense significance because it created a climate of confidence and enthusiasm to attempt other, more diverse and ambitious goals for the 1990s.

55. During 1991, countries were striving to sustain and increase their immunization coverage, particularly those that did not achieve UCI in 1990. As of February 1992, data on 1991 performances has not yet been received from most countries. However, among those received, China and Viet Nam maintained their high levels of coverage and are now focusing on disease control. Bangladesh reached higher levels than in 1990. By November 1991, coverage in Mexico was estimated at 98 per cent. Several countries also experienced difficulties in maintaining performances as high as those achieved in 1990, but efforts are being made to correct those situations. Many countries are planning to reach 80 per cent coverage at provincial and district levels by 1995. Countries with high coverage levels have begun to focus on improving efficiency, cost-effectiveness and capacity for epidemiology, case finding and outbreak control, while countries with lower coverage levels continue to expand access to services through additional investment in the cold chain and training, analysis of drop-out rates and increased attention to regions with problems highlighted through subnational surveys. Sustainability received prime attention during the year.

56. In view of the forthcoming mid-decade challenge of achieving the goals for reducing mortality and incidence of measles, eliminating neonatal tetanus by 1995 and preparing for poliomyelitis eradication by the year 2000, special attention has been given for outbreak control and for increasing and retaining high coverage for increasing epidemiological capacity through efficient and functioning management information systems. In order to eliminate neonatal tetanus, tetanus toxoid coverage will have to be increased significantly during the next two years. As countries begin the disease eradication process, significantly larger quantities of vaccines will be required, especially for poliomyelitis, measles and tetanus toxoid. Prices of vaccines are expected to rise in 1992 and thereafter, placing a burden on countries and UNICEF country programmes to ensure adequate supplies of quality vaccines in order to reach the goals set for 1995 and the year 2000. This issue was discussed by the UNICEF/WHO Joint Committee on Health Policy (JCHP) in January 1992 (see document E/ICEF/1992/L.18 for the JCHP report).

57. In many countries, immunization structures are now the most widespread service infrastructures in terms of the number of people reached and have a greater outreach than the health system or even the postal service. For example, the health system in Bangladesh has reached over 3,000 unions (a group of 6 to 20 villages), while the immunization structure has reached all 4,500 unions.

58. In the area of immunization activities, campaigns are now being replaced increasingly by fixed structures; extensive reliance on mobile units is also being replaced by fixed and outreach systems. Data from several countries indicate that communities involved in the Bamako Initiative also have higher immunization coverage levels.

59. Many countries are now beginning to use those structures to deliver other MCH services, vitamin A and iodine supplementation, CDD and ARI control, antenatal care and health education. In fact, immunization structures are being developed into effective and functioning PHC structures.

60. The Children's Vaccine Initiative, launched in September 1990, has continued to make progress. The Initiative, founded by WHO, UNDP, UNICEF and the Rockefeller Foundation, has established a Consultative Group with a Management Advisory Committee, a Standing Committee (represented by the four founders and the World Bank) and a secretariat located at WHO headquarters at Geneva. During 1991, efforts focused on the organization process and the initiation of activities. Three types of activities have begun: the organization of product development groups to manage the development of a single-dose tetanus toxoid vaccine, a heat-stable poliomyelitis vaccine and a measles vaccine to be given earlier than nine months of age; the organization of task forces to manage operations research for strengthening programme effectiveness; and the establishment of other task forces and networks to improve UNICEF and government capacity for disease surveillance and epidemiology. That capacity is required to organize and monitor progress towards the goals for disease elimination, eradication and control that have been set for the 1990s. As required by Executive Board decision 1991/16

(E/ICEF/1991/15), a full report on the children's vaccine initiative has been submitted to the 1992 Board, with a proposal for UNICEF participation in the initiative for the period 1993-1995 (E/ICEF/1992/P/L.46).

Control of diarrhoeal diseases and cholera

61. Substantial progress was made in the area of CDD during the 1980s. There are now national CDD programmes in 112 countries, servicing an estimated 99 per cent of the developing world's population. UNICEF offices world wide continue to be involved in those efforts and, in many cases, are the major sources of external support. Recent data suggest continued gains in at least three key areas: access to oral rehydration salts (ORS) or access to a trained, regularly supplied provider of ORS; ORS production; and ORT use, meaning the percentage of diarrhoea episodes in children under five years of age treated with ORS or a physiologically appropriate household solution.

62. The WHO estimate of global access to ORS reached 63 per cent in 1990. Gains in Africa were particularly dramatic, with ORS access reaching 52 per cent, up from 22 per cent in 1985. Access to ORS is now highest in the Middle East, with regional coverage of over 70 per cent. By the end of 1990, 64 countries were producing ORS. An average of 355 million litre equivalents of ORS are now available annually, approximately 10 times more than in 1980. Furthermore, over 75 per cent of this production takes place in developing countries, leading to continued reductions in the already low cost of ORS. ORS products are promoted under almost 200 brand names, and about 83 per cent conform to the composition recommended by WHO and UNICEF. During 1990, three additional countries began producing ORS: the Sudan, the United Republic of Tanzania and Yemen.

63. The global rate of ORT use increased to 36 per cent in 1990, up from 23 per cent in 1986 and from less than 1 per cent in 1980. Over one in three diarrhoea episodes among children under five years old are now treated with ORT. WHO statistics indicate that the global use rate of 36 per cent may have averted 1.1 million deaths from diarrhoea in children under five years of age. Increased ORT use rates reflect both greater ORS use and success in the promotion of fluids available at home to prevent dehydration. The most marked increases occurred in some of the larger countries in Africa, where the rate has more than doubled since 1985 in Ethiopia and Nigeria, for example.

64. At a joint CDD strategy meeting held in April 1991, UNICEF and WHO agreed on several basic principles: the need to support CDD at the national level, in addition to support as part of area-based PHC initiatives; the importance of clear national targets; the essential role of feeding in successful ORT; and the need to recognize that persistent diarrhoea and dysentery contribute substantially to diarrhoea deaths among young children. The meeting also outlined several lines of action to expand current CDD efforts, including much greater emphasis on broad-based mobilization, both within and outside the health sector; increased attention to the private sector; and use of the systems and structures reinforced by the expanded programme on immunization (EPI) to strengthen the operational capacity of CDD efforts. Finally, the

meeting identified a combination of use targets that would lead to achievement of the Summit goal of a 50 per cent reduction in diarrhoea-related mortality, including reductions in acute watery diarrhoea, persistent diarrhoea and dysentery. In addition, five basic indicators were identified that could be used to measure progress towards the mortality reduction goal: use of ORT plus feeding; provider compliance with ORS; access to ORS; access to case management; and maternal knowledge of the three rules of home case management (continued feeding, increased fluid intake and knowing when to seek help). An executive directive summarizing the recommendations of the meeting was circulated to all field offices.

65. The scope and nature of CDD activities supported by UNICEF offices vary considerably among countries and regions. In general, activities in Asia tend to be more comprehensive, while in Africa many offices continue to focus on ORS supply and distribution. In Latin America, some innovative approaches to diarrhoea prevention are under way, in many cases using cholera control as the entry point for accelerated CDD activities. UNICEF support to CDD activities includes defining national policies and plans of operations; improving case management, both within health facilities and at the household level; training, both within and outside the health sector; ensuring the availability of ORS through local production as well as importation and other strategies; promoting the rational use of drugs, including the elimination of anti-diarrhoeals, which are almost always wasteful and cost $600 million per year; communications, especially ethnographic research and interpersonal communications between health providers and caregivers; prevention, particularly through the promotion of breast-feeding, improved access to water supply and sanitation facilities and improved personal hygiene practices; and programme evaluation.

66. The campaign against cholera represented the main emergency operation in Latin America during the past year. Starting in Peru, cholera has been systematically spreading to Ecuador, Colombia, Bolivia, Chile, Guatemala, El Salvador, Panama, Honduras, Brazil, Mexico and the United States. As of January 1992, the total number of reported cases was 320,000, with 3,300 deaths. UNICEF has responded to the cholera epidemic with emergency funds for Peru, Ecuador and Bolivia, while Chile, Colombia and Central American countries have made special allocations to control cholera from their own country programmes. An emergency appeal is under preparation for the control of cholera in all affected countries in Latin America.

67. It is worth noting that the case fatality rate in Peru, about 0.90 per cent in December 1991, is one of the lowest ever recorded. In other countries, even those with stronger economies and health infrastructures, average case fatality rates of 10 per cent are common. The epidemic's remarkably low mortality rate can in large part be attributed to the extensive use of ORT, combined with the communal strategy of early treatment to avoid dehydration. At the time of the outbreak of the epidemic in Peru in January 1991, the summer campaign against diarrhoea affecting the infant population, carried out with UNICEF cooperation, was in full operation. Consequently, there were already 2,800 community oral rehydration units in

operation. These units were run by volunteer mothers trained to assess dehydration, administer ORS and advise other mothers on the use of home-made fluids and other aspects of child care. During the epidemic, national Governments and UNICEF actions were redirected to control the epidemic by accelerating the establishment of the community units, the massive distribution of ORS and the implementation of public health education activities. The number of community units more than doubled to 7,000 in August 1991.

Acute respiratory infections

68. The control of ARI is an area of increasing concern in every region. Because of the success of immunization and CDD efforts, ARI is now considered the leading cause of death among young children, accounting for approximately 4.3 million per year, or 12,000 deaths per day. The average child in a developing country has a cough, cold or other respiratory infection four to eight times per year. One in every 30 to 50 of those episodes is life-threatening pneumonia; without proper treatment, 10 to 20 per cent of young children who contract pneumonia will die. Case fatality rates are highest among children less than two months old.

69. By the end of 1990, 47 countries had operational ARI control programmes, having introduced standard case management of ARI in at least some areas. Seven other countries have announced their intention to begin ARI control activities in 1992. The impact of those programmes is already quite impressive. In the Pacific region, for example, the proportion of children with access to ARI standardized case management increased from 1 per cent in 1989 to 10 per cent in 1990. ARI control programmes are most urgently needed in the 94 countries with infant mortality rates of more than 20 per 1,000 live births. Of those 88 countries, 34 now have operational ARI programmes; the goal is to have programmes in all of them by 1995. Today an estimated 12 per cent of childhood pneumonia cases in those countries are treated with recommended antibiotics; the goal for 1995 is 40 per cent, and for the year 2000, 60 per cent.

70. UNICEF offices in over 70 countries are now involved in ARI control activities. This involvement is likely to increase as ARI control is given more priority by ministries of health in developing countries. Experience during the last five years has shown a number of basic elements to be essential to the development of ARI-control programmes, including the formulation of realistic objectives and targets; accurate and reliable technical specifications; a phased approach to implementation; appropriate use of antibiotics; availability and affordability of drugs; effective communication strategies; and viable training strategies.

71. Most UNICEF offices consider the ARI efforts under way in their countries to be in the early stages of development. In many cases, UNICEF offices are being asked to provide antibiotics or to support other ad hoc activities in the absence of national policies or plans of action. While some support of this kind may be necessary, UNICEF offices are being strongly encouraged to

promote the development of national policies before other activities are supported. Other areas of support include global advocacy; operational research, such as in the context of the special three-country project for ARI that includes Bolivia, the Gambia and Thailand; the integration of ARI into ongoing PHC initiatives such as the Bamako Initiative; training in case management, including both first-level referral facilities and community health workers (CHWs); improved home management of ARI; and communication activities, especially interpersonal communication between health providers and caregivers.

72. Together with WHO and UNDP, UNICEF sponsored the First International Consultation on Control of ARI in December 1991. Attended by over 400 health professionals and government officials from around the world, the Consultation aimed to provide the international community with up-to-date information on ARI control, promote global consensus on the action needed to reduce ARI mortality, and generate increased participation in and support for efforts to combat ARI. It was one of the most successful international conferences on disease control, raising awareness of ARI to another level.

Malaria

73. Malaria remains one of the major causes of morbidity and mortality in children, particularly in sub-Saharan Africa and some parts of Asia and Latin America. WHO estimates that, world wide, the number of clinical cases is over 100 million, with more than 1 million deaths each year. Nearly 85 per cent of malaria cases and 90 per cent of carriers are found in tropical Africa. In some areas, 20 to 30 per cent of deaths in infancy and childhood are attributed to malaria. It is a major cause of anaemia, clinical ill health and low birth weight, especially in sub-Saharan Africa. Escalating costs and the subsequent breakdown of vector control programmes (of dwellings sprayed with insecticide), disillusionment among donors, the development of strains resistant to prophylaxes and the absence of an available, low-cost approach have all led to rising morbidity and mortality rates. In addition, poor sanitation practices and colonization in new settlements have exacerbated the situation. For low-income households, even mosquito nets are likely to be a financial burden and the cost of malaria treatment represents a major expenditure. As much as one eighth of family income may be spent for malaria treatment in certain regions of the Brazilian Amazon, for example.

74. Against this gloomy scenario, results from UNICEF-supported tests of the efficacy of using pemethrin-impregnated bed-nets have been most encouraging. In the trial area in the Gambia, the use of the mosquito nets treated with insecticide resulted in a 60 per cent reduction in mortality among children under five years old. UNICEF is now assisting the Government to go-to-scale in two districts. Similar rates of effectiveness and acceptance have been recorded in programmes in Kenya and the United Republic of Tanzania. In Kenya, the sale of treated mosquito nets has been a function of community pharmacies under the Bamako Initiative. The use of impregnated screens or strips is also being tested in Kenya; this project, which has met with initial success, is being monitored with great interest.

75. UNICEF continues to supply anti-malarial drugs and to promote prophylactic treatment for pregnant mothers, as the anaemia and placental insufficiency that result from malarial infection are major factors contributing to low-birth-weight babies, especially in Africa. However, some countries have now found this practice to be unaffordable. UNICEF hopes to participate actively in the forthcoming International Conference on Malaria, to be held in the Netherlands in October 1992.

AIDS

76. The global AIDS pandemic continued to worsen in the last year. WHO estimated in 1991 that from 5 million to 6 million men and from 3 million to 4 million women had already been infected with human immunodeficiency virus (HIV), which causes AIDS. Over 1 million of those individuals progressed to AIDS and most of them died. Almost 1 million children were born infected with HIV, over half of whom developed AIDS or died. Most of those children came from sub-Saharan Africa, where AIDS has already begun to undermine child survival goals. WHO also estimates that by the year 2000, from 30 million to 40 million adults and children will have been infected with HIV since the early 1980s and that over 1 million AIDS cases and deaths will occur annually, mostly in the developing world. While AIDS still assumes immense proportions in parts of Africa and the Caribbean, WHO now estimates that within a few years, new HIV infections in Asia may exceed those in Africa.

77. AIDS continues to pose enormous challenges for UNICEF and its programme partners, both in terms of curbing the further spread of HIV infection and meeting, as far as possible, the social services needs of families already affected. Since the mid-1980s, when UNICEF began its first programme of cooperation on AIDS in Uganda, UNICEF has expanded and refined its activities at country and headquarters levels, has served as a technical resource for other Governments and NGOs concerned about the effects of the disease on women and children, and has played an important advocacy role, working ever more closely with WHO. Those activities were expanded substantially following the Executive Board decision in 1990 to establish an interregional programme to address the impact of AIDS on women and children (E/ICEF/1990/P/L.34).

78. Notwithstanding the successes of the efforts of a full range of international, national and local agencies and organizations, the worst of the pandemic is still to come. The WHO Global Programme on AIDS has called upon the world community urgently to expand and intensify action against the pandemic. In response to this and to Executive Board decision 1991/23 (E/ICEF/1991/15), a full report on UNICEF support to AIDS-related programming, the development of the UNICEF operational strategy and plans for expanded action has been submitted to the Executive Board at its 1992 session (E/ICEF/1992/L.11).

Dracunculiasis (guinea worm disease)

79. At its 1991 session, the Executive Board approved support to the interregional programme to provide technical and other support to dracunculiasis eradication programmes (E/ICEF/1991/P/L.34). The purpose of the fund is to assist UNICEF country programmes and collaborating agencies and institutions to strengthen dracunculiasis control and eradication programmes. The principal objective is to strengthen the community epidemiological capacity required to guide and successfully monitor local efforts, to network and strengthen national operations research capacity and to integrate better dracunculiasis eradication activities with other interventions. The overall goal is to eliminate dracunculiasis as a significant public health problem by 1995, and completely to eradicate the disease globally by the year 2000.

80. During 1991, considerable progress was made towards the eradication goal. Health education, community-based surveillance, water supply and case containment activities were expanded further in most endemic countries. Of the 21 endemic countries, only three have not yet undertaken national surveys, although preparation continues with UNICEF support. Four countries have nearly achieved dracunculiasis elimination, with Guinea and the Gambia reporting no cases for the first time following active surveillance, and the Central African Republic and Kenya reporting a total of only 16 cases after completing surveys. In eight additional countries where national surveys were undertaken for the first time, an eightfold increase in cases was detected over previous passively reported cases. In contrast, an overall 38 per cent reduction in cases was achieved in countries where control efforts are well under way, with higher reductions reported in the most endemic UNICEF programme areas, notably in Nigeria. A nearly 50 per cent reduction was achieved in Cameroon and India, where activities focus on case containment efforts as those countries move to the threshold of achieving their elimination goal.

81. Continued progress was made in the development and application of the automated cartography and district-level, decision-support technologies required in the effort. This technology will be useful later in the decade in the different stages of disease eradication and elimination and for tracing incidences of other diseases targeted for eradication or elimination. UNICEF continued to work closely with WHO, UNDP, Global 2000, the WHO Collaborating Centre for Dracunculiasis at the United States Centers for Disease Control (CDC), the United States Agency for International Development (USAID), the Japanese International Cooperation Agency and other international, bilateral and national agencies and NGOs in supporting relevant technical cooperation activities. Those included continued support for the Dracunculiasis Operations Research Network, the Fourth African Conference on Dracunculiasis and a series of intercountry technical workshops. The UNICEF dracunculiasis eradication programme technical support team was established, drawing on UNICEF technical officers and consultants in endemic countries and elsewhere in order to respond better to national programme requirements. WHO and UNICEF took the first steps towards establishing an inter-agency operational centre in Burkina Faso to increase technical support to endemic francophone countries.

Women's health, safe motherhood, child spacing and family planning

82. During the past year, the goals endorsed by the World Summit for Children continued to provide impetus and coherence to UNICEF-supported activities for women's health and safe motherhood. Of particular relevance is the major goal of reducing maternal mortality by half between 1990 and the year 2000, in addition to other supporting goals including focusing special attention on the health and nutrition of the girl child and pregnant and lactating women; access by all couples to family planning information and services; and access by all pregnant women to prenatal care, trained attendants during childbirth and referral facilities for high-risk pregnancies and obstetric emergencies. An integrated approach is necessary for working towards those goals. To that end, during a workshop held in Sri Lanka in August 1991, a training package for UNICEF field staff on safe motherhood was further modified and refined. Training of field staff is scheduled for 1992.

83. UNICEF continued to support different aspects of safe motherhood. In the area of women's health, UNICEF support for the training and retraining of traditional birth attendants (TBAs) and auxiliary nurse midwives continued on a large scale. Immunization and village-level health care structures are now being mobilized and integrated wherever possible so as to provide prenatal care. Training generally covers prenatal and post-natal care, safe delivery, the promotion of child spacing and family planning information. For example, in Pakistan, where UNICEF is involved in family planning, TBAs are trained to serve as motivators for family planning. In Mali, UNICEF was involved in birth spacing, in cooperation with UNFPA and USAID.

84. Maternal malnutrition and high fertility remain serious concerns globally, and the low educational status of girls and women in South Asia are cause for concern. Activities in support of women in development, with special emphases on the girl child and women's health, are discussed in a separate report before the Executive Board (E/ICEF/1992/L.5). In that context, UNICEF is focusing on delaying the age of marriage and teenage pregnancies, and including examples such as the experience of Bangladesh in discouraging early marriages and the Caribbean experience with "better parenting" to prevent teenage pregnancies.

Family planning

85. Taking into account Executive Board decision 1991/11 (E/ICEF/1991/15), UNICEF activities for the responsible planning of family size continue to be integrated with the safe motherhood initiative within the context of country programmes for MCH as, for example, in Cambodia, the Gambia, Myanmar, Sierra Leone, Sri Lanka, Thailand and in other examples described below. In many cases, such activities involve active cooperation with UNDP, UNFPA and WHO, in accordance with a February 1991 UNDP/UNFPA/UNICEF/WHO joint letter to staff on MCH and family planning. Collaboration has also increased with the World Bank, bilateral donors and NGOs. A separate report on UNFPA/UNICEF collaboration is being submitted to the Executive Board (E/ICEF/1992/L.13).

86. Family planning is also promoted together with CSD activities, as in Maldives, where UNICEF is working with UNFPA, WHO and UNDP in those areas. In Mexico, UNFPA assists the Government's national family planning programme, while UNICEF assists the MCH programme; both programmes form a part of the nation's broader health policy. In the United Republic of Tanzania, regular consultation between UNFPA and UNICEF has become institutionalized, and the joint preparation of programme proposals is common. In Zimbabwe, UNICEF works closely with UNFPA, the World Bank and WHO on advocating child spacing and strengthening rural health units. In addition, UNICEF has also contributed substantially to training enumerators for a survey that will not only provide EPI coverage figures, but also provide baseline data for child spacing.

87. Advocacy and communication activities highlighting family planning and safe motherhood issues have continued to be promoted in Myanmar and Viet Nam, for example. In other countries, there has been collaboration with UNFPA to assist Governments in developing national public information and education programmes to address family health issues. UNICEF has also co-sponsored and supported important conferences on safe motherhood such as the International Conference on Safe Motherhood held at Lahore, Pakistan, in 1990; the Safe Motherhood Conference for members of the Southern African Development Coordination Conference, held at Harare, in October and November 1990; and Namibia's First National Safe Motherhood Conference, held in November 1991. There has also been increased inter-agency collaboration at the headquarters level; UNICEF participates in an informal working group on safe motherhood with UNDP, WHO, UNFPA, the World Bank and other agencies.

88. It has been a common experience in all organizations that family planning programmes are more successful when certain prerequisite conditions are met. One of those preconditions is the desire to have a smaller family, which may result from improving children's chances of survival, improved socio-economic status or increased income, better education - especially of women and girls - and general improvement of the role and status of women. Also important is the knowledge that pregnancies that occur too early (generally before 18 years of age), too late (after 35 years of age), too frequently or are too numerous are dangerous to the lives of both mother and child.

89. UNICEF involvement in family planning activities has taken place within the context of improving MCH. Related activities have included promoting knowledge of birth spacing; information, education and communication; training of CHWs, TBAs and auxiliary nurse midwives; child survival; safe motherhood; female education; improving the role and status of women; income-generating and economic activities; adolescent health; advocacy and support for programmes delaying marriages of teenagers; and inter-agency collaboration with UNFPA, WHO and the World Bank. UNICEF is not involved in abortion or sterilization, however. UNICEF does not provide contraceptives, as an understanding has been established with UNFPA that it will focus on supplies while UNICEF will focus on information, education and communication, training and other related programmes.

Essential drugs

90. Essential drugs must be an integral element of PHC if it is to be credible and function well. As national essential drugs policies are adopted and implemented, countries save on expenditures and also prevent the abuse and overuse of drugs. Essential drugs provided through the Bamako Initiative have been the principal catalytic element in reviving collapsed health structures in Africa. They also contribute to reducing the turnover and attrition of trained CHWs who can now be paid from revenue generated by the sale of essential drugs. UNICEF continued to advocate the adoption of national essential drugs policies covering regulation, legislation, the rational use of drugs and, wherever applicable, financing mechanisms and decentralized planning and management. In 1991, UNICEF supplied essential drugs worth approximately $53 million to more than 100 countries.

91. The UNICEF approach has also changed from the basic supply of essential drugs kits to a more complex and articulated approach, particularly in Africa, through the Bamako Initiative strategy. It focuses on in-service and pre-service training of health staff, including CHWs, and on the rational use of drugs. The training covers the development and use of diagnostic and treatment manuals; the use of essential drugs lists; strengthening or establishing local distribution networks; improving storage facilities and increasing national capacities and skills in drug management in central medical stores; and, at district and peripheral levels, accountability, inventory procedures and the design of basic management tools appropriate for developing countries.

92. UNICEF has maintained close collaboration with the WHO Drug Action Programme and Pharmaceutical Unit, while operations research on drug-related issues has been undertaken in the Africa region. The Drug Utilization and Research Group has been asked to analyse the situation critically and to propose feasible solutions for building local capacities among researchers and health professionals. A joint WHO/UNICEF operations research meeting on the rational use of drugs held at the International Children's Centre in Paris brought together research institutions, international aid agencies and bilateral donors in order to share information and harmonize interventions in more cost-effective ways. Human resources in developing countries were also identified so that a "critical mass" could be created for promoting innovative approaches.

93. A study on the quality of drugs has been designed with WHO to enhance further the effectiveness of the UNICEF role in supplying essential drugs to developing countries. Nine drugs with major stability problems that are used largely at PHC levels were selected to evaluate whether the chemico-physical characteristics claimed could still be maintained under particular stress conditions, such as those in tropical climates, at each stage of distribution. The study has been carried out in conjuction with national drug authorities in several countries in Asia, Africa and Central and Latin America. In order to support and enhance the role of regional testing facilities in developing countries, three quality control laboratories in each

region were identified and teamed with three European university laboratories. In the long term, this will support the development of scientific collaboration between the institutions concerned. Results of the study were expected to be available in December 1991. Collaboration with the World Bank in the provision of essential drugs has been established recently in specific West African countries through joint missions, within the framework of health sector programming.

Healthy lifestyles for youth

94. Young people today are increasingly recognized as an important but neglected group in society. One third of the world's population - more than 1.5 billion people - are between the ages of 10 and 24 years, and four out of five of them live in developing countries. Adolescence is a period of dynamic transition when many new behaviour patterns are set for life. While young people can be one of the world's greatest resources when they are challenged and their needs are met, today's young people live in a world of dramatically changing conditions such as rapid urbanization, the spread of telecommunications across cultural boundaries, severe pressures on family structures and increasing exposure to harmful substances. Those conditions are leading to a rise in health problems such as early and unwanted pregnancies, induced abortion, sexually transmitted diseases and AIDS. The use of tobacco, alcohol and other drugs is increasing and more and more young people are involved in accidents and violence. There is a great and urgent need for action to help young people help themselves, to provide them with support and opportunities so that their true potential may be reached for their own benefit and that of their families, as well as for the well-being and development of society as a whole.

95. UNICEF country programmes have been responding increasingly to those needs with innovative programming in Botswana, Mali, Uganda and the Caribbean. During 1991, in response to the guidance of JCHP, UNICEF intensified programme planning activities to support the healthy development of young people. Working closely with youth experts, national youth agencies and youth-focused NGOs, WHO and UNICEF met regularly throughout 1991 and jointly convened two working meetings to assist the development of those activities and to prepare for expanded programming efforts in that area.

Prevention and rehabilitation of childhood disability

96. Preventable diseases such as poliomyelitis and nutritional disorders such as vitamin A and iodine deficiency continue seriously to disable children in developing countries, although a noticeable decline in new cases of disability caused by poliomyelitis has been registered in several countries because of the successful increase in poliomyelitis immunization coverage. In addition, armed conflicts and civil strife continue to add to the numbers of disabled people. In the past decade, more than 1.5 million children in Asia, Africa, Latin America and the Middle East have been killed by armed conflicts. For every child killed, three more have been injured and/or physically disabled. Psychological trauma affects another 10 million children as an associated

devastating outcome of such conflicts. For the foreseeable future, mines and other explosives left on and under the ground will continue to add to both physical and psychological injuries of innocent children and women (see also paras. 156-159 below on children in especially difficult circumstances).

97. In 1991, the UNICEF policy on childhood disability prevention and rehabilitation continues to emphasize prevention, early identification and timely intervention at the community level, with the active involvement of family members. In countries affected by serious armed conflicts, UNICEF was also involved in detraumatization programmes to prepare children to lead normal lives again. Such an approach can change both the type and the quality of a child's disability and can be crucial for the physical, mental and intellectual development of the children concerned. In addition, many country programmes have paid special attention to needs assessments and surveys, communications activities and advocacy, resource development, increased cooperation with NGOs and to the special educational needs of such children. The lack of comprehensive information on disabled children, of trained personnel and of awareness in the communities involved have continued to be serious constraints.

98. With regard to early detection and intervention, UNICEF has continued to support national institutions for projects on the development of screening techniques and early intervention methods. Innovative initiatives have been encouraged and promoted, including early intervention through home-visiting services in Antigua and Barbuda and in Barbados; strengthening the capacity of crèche workers to identify disability and to counsel parents in India in prevention and rehabilitation; and the development of resource centres for training, research and information to promote community-based rehabilitation services in China.

99. Efforts continued during 1991 to bring disabled people into the mainstream of community life. Community-based rehabilitation projects were supported in several countries. In India, UNICEF assistance was used as a catalyst in a project that encourages and empowers disabled people to establish rural self-help groups and to play a role in the development of their own communities. In Mozambique, the rehabilitation of disabled and traumatized children is supported through their reintegration into the regular school system, with the full participation of families and communities. In Honduras, UNICEF is supporting a pilot project that integrates children with hearing, language or learning difficulties into regular pre-school or primary school classrooms. Disabled women in Afghanistan have been assisted through programmes for income-generating activities. In Nigeria, UNICEF supported an NGO managed by women which has established a school for children of blind beggars, in combination with vocational skills training, such as weaving, for the blind parents. Assistance in both human and material resource development during the past year included the training of nursing and support staff at rehabilitation centres and health clinics, of teachers in schools for the disabled and of parents and volunteers in the community, as well as the development and production of educational material, pamphlets, booklets and posters on childhood disabilities.

100. UNICEF continues to participate actively in the United Nations Task Force on Disabled Women and Children and in inter-agency meetings related to the United Nations Decade of Disabled Persons (1983-1992). The Technical Support Programme on Childhood Disability, with Rehabilitation International, has continued to strengthen UNICEF capacity in that regard. The working agenda of the Task Force will be drawn up in 1992, coinciding with the end of the Decade. At the country level, field activities have been coordinated with the International Committee of the Red Cross (ICRC), ILO, UNDP and UNESCO.

Bamako Initiative

101. The significant acceleration of maternal and child mortality reduction over the next decade cannot be achieved without focusing on capacity-building and institutional-strengthening in the health sector. The main causes of mortality, largely confined to the six major health interventions (ARI, diarrhoeal diseases, malaria, vaccine-preventable diseases, AIDS and unsafe motherhood), will require systems with trained health workers for direct treatment, capacity for supervising CHWs, supporting preventive action, social mobilization of all sectors of the country and empowerment of the people. On the other hand, there is also increasing evidence that ease of access to health care services by itself is an important factor, not only for the increased utilization of services, but also for reducing mortality rates. While UCI has successfully strengthened basic health services in planning, logistics and outreach, it is also true that countries with an efficient and accessible health infrastructure were those that achieved UCI largely without undue difficulties.

102. The Bamako Initiative is a major capacity-building effort, focusing on strengthening district health systems to deliver a basic set of health services most pertinent to local needs and conditions, at a cost competitive to private, traditional and non-formal health providers, and with effective health outcomes. By the end of 1991, 33 countries (up from 27 in 1990 and including four outside of Africa) had begun serious action to address the eight basic principles of the Initiative, with half well advanced in field-level implementation. UNICEF, following the recommendations of the Executive Board, has continued to mobilize its own resources for the Initiative and has committed over $50 million in general resources, with an additional $10 million in supplementary funds. In addition to UNICEF and WHO, other donors are increasingly involved. Projects funded by the World Bank and developed in coordination with UNICEF have begun in Mali, Mauritania and Senegal. Assistance from major bilateral donors and NGOs is growing in many of the countries, leading to prospects for national coverage before mid-decade. However, compared to the needs of the countries and the potential of the Initiative, it is at present greatly underfunded.

103. Community investment in health services, which is at the heart of the Bamako Initiative, has also increased with time. Community funds have now begun to be reinvested to pay for drugs, operating costs, incentives to health workers and, in one country, mosquito nets treated with insecticide to combat malaria. However, communities still prefer to hold funds in bank accounts as they build up confidence in management and decision-making.

104. The evaluation of the Bamako Initiative, sponsored by the Government of the United Kingdom, with financial contributions from the Governments of Denmark, Norway and Sweden, and from both WHO and UNICEF, has resulted in a critical assessment of the Initiative in five countries and has provided indications for improved efficiency and effectiveness. Applied research activities, strongly encouraged by the Executive Board, have been widely supported by UNICEF. They involve the linking of 12 European and North American universities and institutes with Governments and national institutions in 17 developing countries on such diverse issues as quality assurance of care, health service costs, quality of essential drugs and national and local mobilization and communication in support of the Initiative. Interesting facts that have an impact on planning are emerging. For example, services run by female CHWs in Mauritania are utilized 85 per cent more than those run by male health workers. In Sierra Leone, 8 per cent of family income is spent on health across all income groups in rural areas; that figure projected across Africa would mean that literally billions of dollars are being spent and wasted on expensive or ineffective care, only one quarter of which could substantially revitalize public sector health services.

105. It is important to emphasize the importance of African leadership in the Bamako Initiative. During the WHO regional committee meeting held at Bujumbura in September 1991, many of the ministers of health present reiterated their commitment to the Bamako Initiative and its implementation as an appropriate means of strengthening local health care systems. Community leadership is also a demonstrated strength of the Initiative, as indicated by the evaluation noted above. Gaps still exist at the district level, however, in the area of uniting national action with community initiative, which will require greater support from UNICEF and other donors. Support for district leadership - together with continuing emphasis on monitoring and research, greater focus on community reinvestment, the ability of essential drugs logistic systems to meet community needs and the testing of alternative financing mechanisms - will be priority areas for UNICEF in the immediate future, under the technical coordination of the Bamako Initiative Management Unit at headquarters. A full report on the progress made in the Bamako Initiative, with a discussion of experience and issues faced to date, is presented in a separate report to the Executive Board (E/ICEF/1992/L.6), as is the executive summary of the ODA evaluation of the Initiative (E/ICEF/1992/L.20).

Nutrition and household food security

Nutrition

106. Current analyses confirm that the improvement in nutrition which became evident in the 1970s slowed down in the 1980s, with large differences between countries. There has been significant improvement in countries such as Brazil, China, Egypt, India, Indonesia, Mexico and Thailand, while malnutrition has increased in many countries, particularly in Africa. Micronutrient deficiencies have become better understood, and pockets of

iodine deficiency continue to be discovered. The importance of vitamin A for health and survival has been better established, while iron deficiency, affecting hundreds of millions of women and children, is now seen as the most widespread nutritional deficiency of all.

107. The UNICEF nutrition strategy approved by the Executive Board in decision 1990/19 (E/ICEF/1990/13) is being promoted in all countries. Its key assumption is that household food security, access to basic health services, a healthy environment and adequate care for mothers and children are all necessary conditions for improved nutrition, although each condition is insufficient by itself. The misconception in many countries that malnutrition is primarily a result of inadequate food supply, in addition to the common marginalization of nutrition work in health ministries, are the most difficult constraints to improved nutrition in many countries. The important role of adequate care of young children in the form of psycho-social interaction has been particularly neglected. UNICEF is focusing its support on four specific strategies: (a) control of the three major micronutrient deficiencies; (b) the promotion, protection and support of breast-feeding; (c) community participation and empowerment through improved assessment, analysis and capability to design sustainable actions (the "triple A" approach); and (d) improved national policies and strategies through more efficient use of information (nutrition information systems).

108. The basic approach of the UNICEF nutrition strategy has now been adopted in several countries, including Bolivia, Ecuador, Malawi, Mali, Namibia, Swaziland and the United Republic of Tanzania. Several other countries are in the process of reorienting their nutrition strategies in the same direction, including Bangladesh, Chad, Ethiopia, India, Mozambique, Nigeria, the Philippines and Viet Nam. The need to improve young child feeding practices is increasingly recognized in many countries. Too often, however, the focus is on the composition of weaning foods instead of on improved feeding practices, including feeding frequency and style. Other aspects of child care that are important for nutrition are also being recognized gradually, including personal hygiene, the utilization of existing health services, protection, attention and stimulation. Universal basic education, together with improved water supply and sanitation, are crucial for improving those aspects of child care.

109. A rapidly increasing number of countries are showing a greater commitment to addressing the problem of malnutrition, but the majority believe that the nutrition goals will be difficult to achieve. Therefore, it is important that short-term interventions such as micronutrient supplementation and the "baby-friendly" hospital initiative be designed and implemented so as to increase both the demand for and the capability to design longer-term solutions.

110. UNICEF support for growth monitoring and promotion has been evaluated in nine countries. The evaluation showed that the amount of time and effort required to put good growth monitoring operations into practice has been consistently underestimated. Consequently, many activities termed "growth

monitoring" have focused solely on weighing babies. Too much emphasis has been given to the technical aspect of growth monitoring and not enough to the analysis of the causes of growth faltering and the promotion of appropriate actions. Based on the findings of those evaluations, UNICEF will develop a new strategy early in 1992.

111. UNICEF is also reviewing its strategy for nutrition surveillance. This review was triggered partly by the increased need of monitoring the attainment of the goals for the 1990s, and partly by increased recognition that many nutrition surveillance programmes have not achieved their main objective, which is the better use of information in decisions regarding nutrition. A review exercise of the Food and Agriculture Organization of the United Nations (FAO), PAHO and UNICEF is being undertaken in six countries, the results of which will be used to prepare a new strategy for nutrition surveillance. In the meantime, support for national nutrition surveillance has continued in some countries, within the framework of the Inter-agency Food and Nutrition Surveillance Programme.

112. UNICEF works actively with and supports the Subcommittee on Nutrition of the Administrative Committee on Coordination, which provides the forum for inter-agency discussion and policy harmonization. Although not accepted as a co-sponsor of the WHO/FAO International Conference on Nutrition, to be held in Rome in late 1992, UNICEF continues to contribute to its preparation, particularly at country and regional levels. UNICEF is also responsible for the preparation of the conference paper on the role of care in improved nutrition. Collaboration among the four members of the Subcommittee (WHO, FAO, UNICEF and the World Bank) has intensified and resulted in an increased number of joint policy statements and missions to some countries.

Household food security

113. Efforts continued throughout the year to clarify the role of household food security in improved nutrition. Household food security is a necessary condition of, but by itself is not sufficient for improved nutrition. UNICEF continues to underline this important distinction and to support countries in a clearer causal analysis of malnutrition in order to clarify priorities for action. At the international level, UNICEF has participated in a number of working sessions with its United Nations partners to promote this distinction and to outline programmatic implications. Working relationships with IFAD have been particularly strong, and a joint "state of the art" paper is being prepared by the two agencies to outline conceptual issues of household food security and to identify indicators and methodologies to be used at local, national and international levels. This work should contribute substantially to national and United Nations capacity to monitor the Summit goal for household food security during the decade. Discussions are also continuing with the World Bank and FAO. In Angola, Madagascar and the Niger, UNICEF has participated with the World Bank in household food security assessment missions.

114. Africa remains the primary focus of UNICEF support for household food security given the seriousness of food insecurity on the continent. The UNICEF regional office for Eastern and Southern Africa strengthened its capacity to assist country offices in the region through the recruitment of a senior adviser for household food security. The office is coordinating a regional study of household food security, the results of which should provide a broader perspective of the scope of the household food security problem in the region and outline some key programmatic interventions in each country. UNICEF has also participated actively in the activities of the Decade for Food and Nutrition in Africa. Support to household-level, staple food production activities is an important component of UNICEF programmes in many countries of Africa, Latin America and Asia. In many countries, support has also focused on the need to increase both household income and credit facilities to improve food entitlements. Malawi, in particular, has developed an innovative agricultural credit scheme for small-scale farmers that is being replicated by the World Bank and other donors. In this area, efforts will continue to ensure that income-generating and credit activities are viable and sustainable in the long run instead of providing small-scale income transfers. In some Sahelian countries of West Africa, UNICEF has supported village-level cereal banks. Particularly in the Niger, these village structures have provided an important buffer for families at risk of household food insecurity.

115. UNICEF offices in Africa also continue to provide innovative support for household food security policy assessment and design at the national level. That work has often been done in close collaboration with international research institutions. The policy advice provided has often focused on the effect of current structural adjustment programmes on vulnerable groups.

Micronutrients

116. In this area, the highlight in 1991 was the international policy conference on "Ending Hidden Hunger" held at Montreal, Canada, in October. Initiated by WHO and UNICEF to accelerate action to achieve the micronutrient goals endorsed by the World Summit for Children, the conference was also co-sponsored by FAO, UNDP, the World Bank, the Canadian International Development Agency (CIDA) and USAID. Organized by the Task Force for Child Survival and Development, it succeeded in making "super-micronutrients" visible in the political sense. There was a general consensus that the micronutrient goals were the most feasible of the Summit goals and that there were advantages in accelerating their attainment. It was agreed that the approach must be country-specific, with an appropriate balance between long-term strategies of dietary diversification and food fortification, and shorter-term strategies of supplementation. Such an approach fits well with the UNICEF country-based process of programme preparation.

117. During the past year, support was provided for consultations with WHO, especially in relation to vitamin A and iodine deficiencies, and with the Subcommittee on Nutrition of the Admninistrative Committee of Coordination regarding iron deficiency anaemia. Support continued to the International Council for the Control of Iodine Deficiency Disorders (ICCIDD). In addition

to core support for management and advocacy, support was provided for two training courses in French-speaking and English-speaking Africa, for the production of a newsletter and technical manuals and for operational research on laboratory assessment and the optimal use of iodized oil. UNICEF also supported a global course organized by ICCIDD on modern techniques of thyroid assessment that use portable ultrasonograph equipment. Equipment was also provided to selected centres in different regions for participation in surveys in nearby countries.

118. In addition to the developing countries, Eastern and Central Europe have attracted special attention. ICCIDD organized missions to assess the situation of iodine deficiency disorders (IDD) and the status of control programmes in eight countries that identified some serious problems. A survey/training mission to the former Soviet Union helped to clarify the situation regarding the optimal use of iodized oil for unmasking thyroid malignancy in the aftermath of the Chernobyl nuclear accident. Those findings were discussed at an international symposium on eliminating IDD with special reference to the regions of the former Soviet Union, held at Tashkent, Uzbekistan, in November 1991. Sponsored by the former Soviet Government, ICCIDD, WHO and UNICEF, the meeting was a landmark event in raising awareness of the problem and the need to deal with it on a sustained basis.

119. The International Programme for the Control of Iodine Deficiency Disorders, based in Atlanta, Georgia (United States), and involving collaboration between Emory University, CDC and the Task Force for Child Survival and Development, provided training in epidemiological assessment, laboratory techniques and programme development to nationals from six countries in addition to back-up support at country level. This programme is evolving, partly through networking with other centres of expertise, into a more comprehensive programme on micronutrient malnutrition. Together with other programmes, it will strengthen the capacity to provide technical support to countries seeking assistance for assessment, programme development, implementation and monitoring.

120. Most UNICEF support is provided in the context of country programmes. For IDD control, UNICEF provides equipment and training for salt iodization and, in some cases, the required potassium iodate, either as part of agreed assistance or as a procurement service for Governments. In Bangladesh, for example, 90 locally manufactured iodization units were supplied by the end of 1991 and the balance will be provided during 1992 to ensure that all salt for human consumption is iodized. By then, the country will be well on the way to attaining the Summit goal of virtual elimination of IDD. In many countries, iodized oil is also provided for immediate benefit, either by injection or increasingly in capsule form to be taken orally. With UNICEF-supported water supply programmes, countries such as Mali and Viet Nam are exploring the provision of iodine through water supplies.

121. In many countries, UNICEF provides vitamin A capsules for children under six years of age. In some cases, trials conducted jointly with WHO on the use of a dispenser have produced encouraging results. The use of vitamin A

supplements in the treatment of measles is on the increase as, for example, in Chad and Mali. Programmes to treat vitamin A deficiency by improving household food security seek to promote increased production and consumption of vitamin A rich foods as, for example, in Viet Nam, in cooperation with FAO, but much more needs to be done in this area.

Breast-feeding and the "baby-friendly" hospital initiative

122. The Innocenti Declaration on the Protection, Promotion and Support of Breast-feeding remains the basis for UNICEF policies and action in support of infant and young child feeding, as recommended by the Executive Board in its decision 1991/22 (E/ICEF/1991/15). The Declaration specified four areas of country-level action: (a) creating a multidisciplinary breast-feeding committee with a national coordinator; (b) ensuring that every maternity care facility supports implementation of the joint WHO/UNICEF guidelines summarized as the "10 steps to successful breast-feeding"; (c) adopting legislation to put into effect the International Code of Marketing of Breast Milk Substitutes; and (d) adopting and enforcing appropriate maternity entitlement legislation to ensure that all women, whether employed or not, can breast-feed exclusively for the first four to six months.

123. In the last 12 months, it has become increasingly clear that achieving all the health and nutrition goals for the 1990s will require advocacy at the highest level to support the actions specified by the Innocenti Declaration. This was highlighted at the 1991 World Health Assembly, when, following the Executive Director's intervention on follow-up to the World Summit for Children, numerous delegates urged that actions to achieve the goals begin with accelerated efforts on basic issues such as breast-feeding that had not yet received the support they deserved.

124. In June 1991, WHO and UNICEF jointly launched the "baby-friendly" hospital initiative to accelerate the promotion and protection of breast-feeding. The concept of the initiative, based on joint WHO/UNICEF guidelines, recognizes the critical supportive role that hospitals can play in the movement to promote breast-feeding. It also recognizes that hospital practices have contributed greatly to the trend away from breast-feeding, particularly exclusive breast-feeding, through routine practices such as separating mother and child at birth, initiating newborns on artificial feeding rather than breast-feeding and denying women the support they require in the first few days - the most critical point for initiating and sustaining exclusive breast-feeding. Furthermore, hospitals have often become dependent on formula supplied free or at low cost to sustain those routines. As a result of those practices, health workers have been trained not to support breast-feeding, but rather to promote artificial feeding. In most cases, such practices destroy women's capacity to breast-feed after being discharged from maternity hospitals.

125. The "baby-friendly" hospital initiative aims to reverse that situation by ensuring that all hospitals and maternity care facilities implement fully the "10 steps to successful breast-feeding". The initiative will be implemented

so as to accelerate the promotion, protection and support of breast-feeding and gradually make hospitals more PHC-oriented. Improved breast-feeding will lead to increased awareness of the important role of care for better nutrition. The initiative will also be designed to increase the general awareness of the problem of malnutrition, increase the demand for long-term solutions and mobilize resources for sustainable programmes to achieve all the nutrition goals. Countries are being encouraged to expand the "baby-friendly" concept to include more comprehensive and regular immunization services; wide use of ORT; discontinuation of harmful or unnecessary anti-diarrhoeals and antibiotics; availability of regular antenatal care services; and the provision of an entire array of clinical services and appropriate counselling for family planning.

126. To date, the "baby-friendly" hospital initiative has received support from numerous high-level government officials, as well as from professional societies of paediatricians, obstetricians, midwives, nurses and lactation consultants, who have joined with WHO and UNICEF to promote the "10 steps". In addition, breast-feeding promotion organizations have rallied their human and technical resources for the implementation of this initiative and other related activities specified in the Innocenti Declaration. The Infant Food Manufacturers Association, on behalf of its 33 members, has agreed to end free and low-cost supplies of formula to hospitals and maternity facilities throughout the developing world by December 1992. To accelerate the pace of this transformation, commitment and action by Governments will be required, together with the involvement of health care systems and the public, especially mothers.

127. A short-term strategy for the period 1991-1993, initiated in the past year, aims to give international and national recognition to all facilities that implement the "10 steps". Country-level support is focusing on creating capability within each country to achieve the long-term goals of the "baby-friendly" hospital initiative through institution-building and intensive training of health workers. As a start, 12 countries (Bolivia, Brazil, Côte d'Ivoire, Egypt, Gabon, Kenya, Mexico, Nigeria, Pakistan, the Philippines, Thailand and Turkey) received intensive WHO and UNICEF support to ensure that by February 1992, at least two hospitals in each country became "baby-friendly". The President of Indonesia inaugurated a weekend of celebrations in December 1991 devoted to "baby-friendly" hospitals, safe motherhood and programmes for women. He proclaimed it as a national movement and 49 winners of the 1991 "baby-friendly" hospital competition were awarded with prizes. It was followed by "baby-friendly" hospital seminars the next day, attended by national and provincial leaders, hospital directors and leaders in the fields of medicine and child care. Other countries such as China, Djibouti, the Islamic Republic of Iran, Iraq, the Sudan, Swaziland and Tunisia have also initiated "baby-friendly" support activities. The experiences of those countries will be utilized to expand the initiative globally. Programmatic efforts will be directed to advocacy, training of health workers in lactation management, research and legislation to protect breast-feeding.

128. The Executive Director has requested the Director of the Division of Public Affairs to coordinate overall UNICEF mobilization around the initiative. The Division has worked closely with country offices, National Committees for UNICEF and other headquarters divisions. In the 12 countries mentioned above that received initial support, the Division provided assistance towards ending the distribution of free and low-cost supplies of infant formula to hospitals, maternity centres and other health facilities. The Division is also working closely with the Programme Division in developing the next phase of the initiative, which has the long-range aim of achieving the global breast-feeding goal for the 1990s. It will thus coordinate with the other external relations divisions and the Programme Division in providing direct support to country offices to aid the transformation of hospitals and maternity facilities into "baby-friendly" institutions. Specific targets for 1992 include the establishment of lactation training and resource centres, the enactment of necessary laws, regulations and procedures, and the designation of a majority of leading maternity institutions in every country as "baby-friendly" by the end of the year.

129. As a result of collaborative efforts between WHO, UNICEF, USAID and the United States Department of Health and Human Services, there has been progress in other areas, particularly in the development of indicators for household and health care facilities to monitor progress towards the breast-feeding goal. Implementation of the Innocenti Declaration has received further support on three fronts: (a) the creation of the World Alliance for Breast-feeding Action in February 1991 in order to mobilize the technical and human resources of major international organizations for implementation of the Declaration; (b) the creation by USAID of a Centre for Breast-feeding Excellence, with a $30 million fund; and (c) renewed enthusiasm among donor Governments to fund breast-feeding promotion activities. In addition to USAID, the Governments of the Netherlands and Sweden have supported WHO in increasing its capacity to accelerate the implementation of the International Code of Marketing of Breast Milk Substitutes by Governments.

130. In September 1991, WHO convened a meeting to review the process towards implementation of the Code in different countries and the mechanisms for accelerating that process. It has become clear that without a rapid increase in the technical capacity of Governments to analyse marketing practices and develop appropriate regulations, the protection of breast-feeding will continue to be compromised and promotion and protection efforts will continue to compete with misinformation directed at mothers, health workers and the public.

Water supply and environmental sanitation

131. During 1991, UNICEF cooperated in water supply and sanitation projects in 95 countries, compared with 90 in 1990. Among United Nations agencies, UNICEF has provided the largest grant allocations for the sector. In 1991, UNICEF expenditure amounted to $83 million (not including $18 million for emergencies), six times more than the amount of the grants contributed by the Department of Technical Cooperation for Development of the United Nations

Secretariat, three times that of WHO and one and a half times that of UNDP. Although the UNICEF contribution is less than 1 per cent of global sector throughput in developing countries, it contributes to over 15 per cent of annual global water supply coverage. That achievement has been attained through successful advocacy for the use of low-cost technologies, leading to significant government and community contributions. An outstanding example has been the case of India, where in 1985 only 46 per cent of the rural population had access to safe drinking water, but 96 per cent did in 1990. UNICEF has focused its contributions to sector throughput by intense cooperation on sector management, policies, social mobilization, the use of low-cost technologies and community participation.

132. At the threshold of the decade of the 1990s, the focus for the water supply and sanitation sector is on the implementation of key lessons learned during the United Nations International Drinking Water Supply and Sanitation Decade. To monitor systematically the achievement of the sector goals of universal access to water supply and sanitation, renewed emphasis is being given to sector monitoring at country and global levels, with annual reporting for improved sector management. WHO and UNICEF have developed a joint monitoring programme to assist developing countries in establishing national monitoring units. The benefits of such enhanced monitoring include better management of the sector by national authorities, the provision of reliable data, a catalytic effect on accelerating coverage and increased potential to attract more resources to the sector. Core data for country-level monitoring will also be used for global monitoring. Another aspect being emphasized is retraining of most, if not all, of the 160 UNICEF field staff over the next two years through regional workshops to equip them to meet the challenges of the 1990s.

133. In 1991, good progress was made in at least three crucial areas: community management for maintenance; intersectoral linkages; and the increasing use of social mobilization within the sector. Many water supply and sanitation programmes have strengthened community management. For example, the programme in Uganda is influencing positively the evolution of national policy on community involvement in water supply and sanitation systems management, while Equatorial Guinea is using the Bamako Initiative framework for the self-financing of water supply and sanitation systems. In Bangladesh, women's names are now included on application forms for tube-wells and women participate in site selection and hand-pump maintenance. A trend of the past 10 years has also continued, linking water supply and sanitation programmes more closely with the health, nutrition, education and environment sectors. However, such linkages need to be more actively promoted and expressed more explicitly, particularly in the case of CDD interventions.

134. Several countries are now realizing that there is no easy solution to the sanitation challenge, but that innovative and radical uses of social mobilization can make a significant difference. Knowledge, attitude and practice studies have led Bangladesh, Botswana, India and other countries to realize that marketing techniques for convincing families to own or use latrines must be based more on issues of privacy and convenience rather than

on health issues. Those countries, with others such as Cambodia, Uganda, Vanuatu and Viet Nam, have given renewed priority to sanitation programmes injected with social mobilization components at every level. In many cases, one constraint is the need for the social communications machinery to be transformed so as to encompass and underpin all sectors.

135. Water supply and santiation programmes have paid increasing attention to capacity-building, as weak institutions have proven to be a serious constraint to programme sustainability. Several countries, including Angola, Cambodia, Ghana, Guinea, Mozambique and Pakistan, have systematically incorporated national capacity-building in their programmes. In Guinea, UNICEF has focused since 1979 on strengthening the capacity of the National Rural Water Authority to plan, manage and execute projects. Guinea's rural water supply coverage increased from 2 per cent in 1980 to over 50 per cent in 1991 because of increased donor support and greater absorptive capacity. Similarly, Cambodia increased its rural water supply coverage from 3 per cent in 1986 to over 15 per cent in 1990, with UNICEF support.

136. In several countries, low-income urban areas, particularly peri-urban zones, are being given priority. The populations in such areas are usually able and willing to finance their own water supply and sanitation systems if they are given assistance in organizing themselves. At Tegucigalpa, UNICEF assisted the urban poor to establish and manage their own projects, with a resulting drop in cost from 40 to 4 per cent of household income. Cambodia, Kenya, Guinea, Mozambique, Myanmar, Nepal, Pakistan, Peru and the Sudan are other examples.

137. Technical cooperation among developing countries was accelerated in 1991 through educational visits and information exchanges. During the past year, Ghana, India and Nigeria traded experiences on the extraction of dracunculi from the body. Nigeria assisted Ghana with a water supply and sanitation study. Sierra Leone helped Namibia to develop the framework for its five-year programme. Bangladesh's TARA hand-pump is gaining popularity in India and Mozambique. Inter-agency collaboration was given a boost when the global Collaborative Council for Water Supply and Sanitation was inaugurated at Oslo, in September 1991. Membership comes from all active external supporting agencies and national institutions from developing countries. The Council is a global forum for discussing water supply and sanitation issues and for advocacy, and UNICEF is expected to play a full and active role. At the field level, activities in Central America provide an example of inter-agency collaboration; UNICEF and other international agencies, including CIDA, the German Agency for Technical Cooperation, the Inter-American Development Bank, the Swiss Development Corporation, SIDA, UNDP, the USAID Water and Sanitation for Health programme and the World Bank collaborated in a programme based at the UNICEF Guatemala office.

Basic education

138. The expanded vision of education for all, as articulated by the World Conference on Education for All and reaffirmed by the Summit Declaration, provided impetus and guidelines for all UNICEF activities in the education sector during the year. The main areas of activity in 1991 included developing policies and strategies and translating them into operational activities at the field level, building institutional-capacity and strengthening collaboration with partners from the Conference, in addition to alliances with other multilateral and bilateral agencies and NGOs. Access to and quality of education, enhancing teachers' qualifications through training, ensuring adequate teaching/learning materials, evolving better assessment methods and learning indicators, supporting early childhood development and reducing gender, geographic and income disparities were all prominent features of UNICEF country programming.

139. World-wide mobilization for basic education continued at national, regional and global levels during the year following the Jomtien Conference. UNICEF played an important role in many of the activities, conferences and round tables organized by Governments, international agencies and NGOs by encouraging and supporting the formulation of national Education for All plans and other Jomtien follow-up activities. UNICEF was actively involved in the planning and organization of the International Consultation Forum, held at Paris from 4 to 6 December 1991; and the Executive Director chaired a session on the prospects for attaining universal primary education.

140. During 1991, UNICEF took several important steps to respond effectively to the challenge of Jomtien. An action plan to promote the goals of Education for All has been developed to target children prior to school enrolment and during the primary-school years, and also to target adults with respect to essential knowledge for living, disseminated through various means, including different channels of communications (the "third channel"). Policy studies, analytical tools and training packages were prepared to help develop UNICEF policies and strategies on basic education and to build institutional capacity to handle the new challenges. A number of papers, such as "Educating Girls and Women", "Education for All: The Goals for the 21st Century", "Educating All The Children", "Education and Gender: Why the Gap?" and "Indicators of Basic Education", have been prepared to aid policy dialogue and advocacy. Training packages on Education for All have also been prepared, as well as specialized training on "comprehensive education analysis". A team of senior regional education advisers and about 60 programme officers are being recruited to strengthen the capacity of country offices to implement basic education, while five senior advisers in the Programme Division's Education Cluster at headquarters provide policy guidance and technical support. Six regional meetings and one headquarters seminar were held for over 250 representatives and senior staff, and three regional training workshops on basic education were held for UNICEF programme officers. Support from the Global Basic Education Reserve Fund was approved for activities in 14 countries towards achieving Education for All goals.

141. As the cutting edge of basic education, primary education received the bulk of UNICEF support. In Malawi, for example, UNICEF support to primary education included teacher upgrading, the development of materials for new curricula and the preparation of a situation analysis of primary education. In Turkey, important work was done on the assessment of learning achievements. In Bangladesh, UNICEF supported the dissemination of new curricula via workshops for 46,000 primary schoolteachers, the printing of 50 million textbooks and in-service training for 163,000 primary schoolteachers. Exchanges of experience about the Escuela Nueva project in Colombia have taken place in countries such as Ecuador and Senegal. Similarly, the Bangladesh Rural Advancement Committee project, on an alternative approach to primary education for left-out and dropped-out children, was the site of a regional training workshop. In China, UNICEF supported community initiatives to improve primary education in 100 disadvantaged rural counties, in addition to the training of teachers and the development of materials and facilities for distance education programmes.

142. The goals for achievement and equity in basic education underline the necessity of providing low-cost, community-based early childhood development and stimulation activities, especially for children in rural and disadvantaged communities. UNICEF supported such activities in many countries through the development of policy and curricula, the training of parents, preschool educators and facilitators, and the provision of teaching/learning materials. In Ecuador and Colombia, communities were assisted in planning, monitoring and evaluating their early childhood development programmes. Support for training and involving more parents in such programmes was provided in several countries through community-based approaches in China, Egypt, India, Jordan, Kenya and Zambia, for example. Special efforts are being made to go-to-scale in China, India, Indonesia, the Philippines and Thailand.

143. The reduction of gender disparity in educational access and achievement is a sine qua non for universalizing primary education, especially in countries where such disparity has been a major concern. Advocacy documents on girls' education and a staff working paper on the gender gap in education have been prepared. Factors affecting girls' educational opportunities are being addressed in policies and programme formulations, especially in the Middle East, South Asia and sub-Saharan Africa. Awareness-raising through research, studies and workshops has been a major area of UNICEF support in many countries. Where formal schools are inadequate or unresponsive to girls' specific concerns, support for non-formal channels has continued, as in mosque schools in Bangladesh, Kenya, Mali and Pakistan, Cheli Beti schools in Nepal, home schools in Pakistan and Bangladesh Rural Advancement Committee schools in Bangladesh.

144. UNICEF continued to support literacy programmes, especially for women, in countries such as Algeria, Haiti, Jordan, Namibia, Nigeria and Yemen, focusing on social mobilization through the media, material development and teacher training. Other components are included in many of those adult literacy programmes, including income-earning opportunities for young, illiterate women, as in China and Indonesia, or health education and skills development in Senegal.

145. A comprehensive and large-scale programme of education supported by UNICEF is the Bihar education project in India, which addresses the problem of general non-participation, including a large gender gap in education. Activities during the year focused on establishing processes to determine and operationalize interventions. In the area of early childhood development, a major effort is being made to strengthen the integrated child development services programme and to improve linkages with the rest of the education system. In primary education, the focus has been on formulating and developing plans through a series of workshops. In non-formal education, the focus has been on providing materials, strengthening training and supporting innovative NGO projects. Literacy and adult education have been identified as both successful entry points for social mobilization and important components of the Bihar project. "Third channel" interventions such as radio, television, folk media, posters and village meetings have been used extensively for social mobilization and literacy and for providing essential life-supporting knowledge for youth and adults.

146. Health and nutrition education continue to be promoted in primary schools in many countries, including Egypt, Jordan, countries bordering the Persian Gulf, Mali and Morocco. Uganda is implementing a large-scale school health education project in an effort to combat AIDS. Facts for Life, a powerful tool for empowerment with knowledge and skills for survival and development, is now published in over 130 languages in 90 countries. UNICEF has also been supporting special educational facilities for children in especially difficult circumstances, including war-traumatized children in Angola, Liberia, Mozambique and Sri Lanka, and street children and working children in Brazil, Egypt, Kenya, Mexico, Pakistan, the Philippines and Zambia. A UNICEF-supported innovative peace education programme in Lebanon has continued to mobilize thousands of young people from diverse backgrounds to learn to live in peace and harmony.

147. At the headquarters level, inter-agency collaboration has been greatly strengthened. Areas of cooperation with UNESCO have been identified and a formal agreement has been signed by the two agencies. Collaboration with the World Bank has also been initiated, especially in sub-Saharan Africa, and a working group on education has been established. In addition, UNICEF has been actively involved in the Donors to African Education Task Force, particularly in the working groups on female education, statistics, the teaching profession, the book sector and the Donors to African Education Information system. With USAID, an agreement has been reached to form a working group on education for all for coordination of field-level activities. Areas of collaboration with ODA are being explored. Collaboration with UNDP has been enhanced, particularly with the Human Development Report team and in the area of girls' education. UNICEF promotes an active role for NGOs and sponsored an international consultation on girls' education and the NGO contribution at UNICEF House in November 1991. A conference on the "Third Channel", organized by UNICEF headquarters to explore its potential for providing basic education, was attended by representatives from multilateral and bilateral agencies, NGOs and the private sector.

Women in development and the girl child

148. A notable improvement in the quality of UNICEF studies and analyses of the situation of children and women has resulted in a greater appreciation of the opportunities and constraints facing women and girl children in all regions. It has also brought into sharp focus the important relationship between achieving the goals for children and the fundamental changes required in the status, self-development, economic independence and socio-political empowerment of women, beginning with the girl child.

149. The formulation of national policies on women and their improved legal and political status is a fundamental requirement for the advancement of women. UNICEF advocacy and technical support have been provided to achieve significant progress in several countries. The growing process of democratization world wide has also provided an opportunity for many countries to reorganize and strengthen institutional mechanisms for promoting women's interests. However, an emerging trend seems to be that women's organizations previously sponsored by Governments are being disbanded or reduced in status in the new democratization process. Appropriate mechanisms are needed to ensure that women have a voice in changing political systems. If the new institutions for women and female policy makers are to play an effective role in advocacy, policy formulation and programme coordination, they will require political, financial and technical support.

150. The priority focus on the girl child endorsed by the Executive Board in decision 1990/17 (E/ICEF/1990/13) has directed greater attention to the situation of the girl child and the adolescent girl. UNICEF has undertaken significant situation analyses on the girl child in several countries, while the girl child has been incorporated as a major concern in new country programmes being presented to the Executive Board at its 1992 session, including those for Morocco (E/ICEF/1992/P/L.29) and Pakistan (E/ICEF/1992/P/L.26). National strategies and plans of action on the girl child with long-term perspectives for the decade have been prepared in Bangladesh, India, the Islamic Republic of Iran, Nepal, Pakistan and in the Caribbean region. UNICEF advocacy on issues affecting the girl child has been intensified in all regions. The summit forums of the South Asian Association for Regional Cooperation (SAARC) were effective promotional and operational instruments for generating political commitment to the girl child. The Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women are powerful tools for advocating and implementing policies and programmes to ensure the full human rights and dignity of the girl child in the 1990s. Collaboration between the Statistical Office and the Division for the Advancement of Women of the United Nations Secretariat, UNICEF, UNFPA and the United Nations Development Fund for Women culminated in the past year in a unique publication, The World's Women 1970-1990 - Trends and Statistics. It is unique because of its readability as a statistical report, its multifaceted, global coverage of the situation of women and because it is a product of the collaborative work of many United Nations agencies. A full and comprehensive discussion of the progress made and the issues regarding women in development and the girl child can be found in a separate report to the Executive Board (E/ICEF/1992/L.5).

Urban services

151. Urbanization continues to increase rapidly in many parts of the world, particularly in developing countries. While about 45 per cent of the world's population currently lives in urban areas, annual urban growth rates are around 3.5 per cent. Over 80 per cent of that growth is in developing countries, and it is expected to increase to 90 per cent by the year 2000. Growth rates within cities vary from about 2 per cent in higher-income areas to over 10 per cent in deprived areas in some cities. To help meet the challenge, two parallel approaches have been promoted in the past year: ensuring that sectoral programmes include a focus on urban needs; and implementation of urban basic services programmes in selected urban centres. Community participation in urban basic services will help to protect and promote the well-being of children in a sustainable manner. In turn, the programmes themselves will be strengthened by targeting measurable goals.

152. Following an initiative of the Italian National Committee for UNICEF, and in conjunction with the mayors of major cities around the world, UNICEF has begun an initiative called "mayors as defenders of children". The initiative sets the stage for municipal planning and programming for meeting the Summit goals. Initially, it will be carried out in a few selected cities and be followed by others across the globe. It will focus on harnessing the commitment of mayors and municipalities towards attaining their own cities' priority goals within the framework of the national programmes of action. It aims especially to target children of the urban poor through support to low-cost, community-managed, sustainable and replicable actions that will be based on the continuing experience of UNICEF urban basic services programmes.

153. There is a critical need for disaggregated urban data so that progress towards the Summit goals can be monitored. Aggregated statistics are misleading, showing various indicators in urban areas to be better than rural ones. However, disaggregated data almost always show that urban deprived areas are worse off than rural areas and that disparities between the affluent and the deprived are correspondingly greater in urban areas, as indicated also by the UCI experience. Therefore, UNICEF has initiated and assisted attempts to disaggregate global indicators within urban areas in order to facilitate monitoring of Summit goals. Such attempts must be more widespread, however, because of trends towards rapid urbanization.

154. Because various urban growth and urbanization levels in different countries and regions require particular responses from Governments, NGOs and UNICEF, the urban component of each country programme will necessarily vary, either addressing urban issues within the context of national or sectoral activities or as an urban basic services programme. It has become increasingly clear, however, that at least in the situation analysis, every UNICEF country programme must include a specific focus on special urban problems and the implication for the UNICEF response. In several countries there is also a critical need for advocacy in favour of more progressive policies regarding the urban poor and their living conditions.

155. Although the urban population is already considerably larger in most African countries and is growing faster than the overall population, the majority of African country programmes do not have an explicit urban focus or component, except perhaps on issues relating to street children or working children. Activities for children in especially difficult circumstances seem generally to address only the symptoms and not the root causes of the problem. On the other hand, the Latin American and Caribbean country programmes are urban-oriented because most of the population live in urban areas. Several countries in the region are experiencing their worst economic crises to date, resulting in dramatically reduced social sector spending and an accompanying deterioration of the situation of children and women. Therefore, the need for low-cost, high-impact interventions is critical. In the Asia region, established urban programmes in several countries showed solid progress in 1991, while in others urban programmes are being initiated. Programme analyses and assessments in some countries have shown the need to focus more on urban areas and to strengthen linkages between CSD and local municipal-level development efforts. In the Philippines, urban basic services programmes are being institutionalized by being incorporated into city development plans and budgets. In the Middle East and North Africa, the region's high urbanization rates will need to be reflected in future analyses as well as by the inclusion of urban-specific components. In some countries, there are already existing projects for children in especially difficult circumstances that could lead to urban programmes. Refugee or displaced populations that have swelled the ranks of the urban poor are special issues in Djibouti and the Sudan and are being dealt with in both emergency rehabilitation and longer-term programmes. Turkey's gecekondu (shanty town) programme for disadvantaged urban neighbourhoods has now moved into an active phase.

Children in especially difficult circumstances

156. In the past year, there has been an increasing, world-wide awareness of child abuse, neglect and exploitation - one of the fruits of the Convention on the Rights of the Child, perhaps, since about half of its articles refer to children in especially difficult circumstances. The Convention has raised awareness of and concern for the urgent need for services for such children and has led nations to reflect on the underlying causes of their increasing numbers. More country offices in Asia and Africa have begun to undertake situation analyses, and several have developed new projects and programmes for children in especially difficult circumstances that have received supplementary funding. A regional programme has been initiated in the Middle East and North Africa that emphasizes education for peace and the psycho-social rehabilitation of children affected by armed conflict. ILO and UNESCO have also begun to expand their work in that area, in collaboration with UNICEF. New training materials and resource books have been produced for children affected by armed conflicts. A new publication series of case studies and methods for programmes for children in especially difficult circumstances has been launched.

157. Much remains to be done, however. Most countries still have limited information about the size and nature of the problems of child abuse, neglect and exploitation. Armed conflicts continue to kill, wound and disable children both physically and mentally, especially in Africa, where conflicts have continued in several countries. Most recently, conflicts in the Middle East and Eastern Europe have demonstrated that no region is immune to armed conflict. Street children are being murdered in some Latin American countries, while the exploitation of children in prostitution seems to be increasing in Asia. Even more horrifying are the new phenomenon of selling children and the high incidence of HIV infection among sexually exploited children. The complex underlying causes of these problems are still poorly understood in many countries, but there are many international linkages that make those problems a world-wide concern and responsibility.

158. There is promising work going on in both industrialized and developing countries. Methods developed in industrialized countries to screen families based on sets of risk indicators have proven to be helpful in predicting child abuse and neglect and have led to effective child abuse prevention programmes. Methods for reaching street children with non-formal education and other services have spread rapidly from Latin America to countries in Asia and Africa through UNICEF-supported NGO networks such as Environment et développement du tiers monde (Environment and Development in the Third World), the African Network for the Prevention and Protection against Child Abuse and Neglect, and Child Hope. Rapid and relatively low-cost methods have been developed for screening children for psycho-social problems resulting from armed conflicts, in addition to low-cost community and school-based methods for responding to those problems in Sri Lanka, Mozambique and the Middle East. Education for peace, pioneered by religious groups and developed conceptually by UNESCO, is now being implemented on a large scale in Lebanon and is increasingly seen as an aspect of basic education in other countries. Experiences with education for peace and psycho-social and physical rehabilitation were shared with 16 countries in armed conflict through an interregional training workshop on children in armed conflict.

159. While civil wars and armed conflicts in countries such as Angola, Cambodia, El Salvador and Ethiopia came to an end in 1991, other conflicts re-emerged or intensified. Conflicts in parts of the former Soviet Union, the situation between Iraq and Kuwait and the civil wars in Liberia, the Horn of Africa and Yugoslavia brought hardship and untold misery of varying degrees to the people in those countries. UNICEF continued to promote the concept of "corridors of peace" for children and to participate in the provision of humanitarian assistance to the affected areas. While the need for innovative means of serving such populations always existed, the concept of "zones of peace" for children came into acceptance only in 1984 after a debate by the Executive Board. "Corridors of peace" and "days of tranquillity" emerged out of this concept and were endorsed by the World Summit for Children.

Emergency operations

160. During 1991, UNICEF provided emergency assistance to 43 countries in Africa, Asia, Latin America, the Middle East and Europe. Appeals issued within the overall framework of the United Nations provided the main source of finances for the non-food components of UNICEF emergency programmes. One of the main focuses of activity for the past year was the situation between Iraq and Kuwait, for which UNICEF had received some $37 million in contributions up to November 1991. Other major emergency events in 1991 were the cyclone in Bangladesh; the volcanic eruption in the Philippines; earthquakes in Afghanistan, Costa Rica and Panama; floods in the Islamic Republic of Iran, Myanmar and Viet Nam; and outbreaks of cholera in Latin America and Africa. In addition, conflicts and population displacements in Angola, Djibouti, Ethiopia, Liberia, Mozambique, Sierra Leone, Somalia and the Sudan, as well as developments in Eastern Europe, have continued to pose challenges to the Emergency Office. The Special Emergency Programme for the Horn of Africa, which covers the emergency requirements of Ethiopia, Djibouti, Kenya, Somalia and the Sudan, was launched in July 1991. The proposed UNICEF share of the appeal amounted to $70 million. The Executive Director's Emergency Reserve Fund was used to support emergencies in Afghanistan, Albania, Bangladesh, Bulgaria, Cameroon, Chad, Costa Rica, Ecuador, the Islamic Republic of Iran, Kenya, Peru, Panama, the Philippines, Malawi, Mauritania, Mauritius, Mozambique, Viet Nam, the West Bank and Gaza, countries affected by the situation between Iraq and Kuwait, Yemen and Yugoslavia.

161. The conditions under which UNICEF delivers emergency assistance vary greatly, but are often fraught with great risk. In Somalia, where throughout 1991 UNICEF assisted mothers and children in all areas as soon as they became accessible, tragedy struck on 5 January 1992. On that day, in the north-east part of Bossaso, Dr. Marta Pumpalova, a UNICEF paediatrician, was shot and killed by three unidentified gunmen. Northern Somalia had hitherto been quiet, and UNICEF had a complement of eight international staff working in the area, providing assistance in water supply, sanitation, immunization, basic health services and supplementary feeding. The tragedy occurred while four UNICEF staff were also working under great risk and in close association with NGOs in the war-torn capital of Mogadishu. As the Executive Director said to his colleagues and the bereaved family of the victim: "Danger is always present in emergency field work and death all too frequently a possibility. But still, brave people like Dr. Pumpalova risk their lives to undertake hazardous assignments to bring succor to children and women in desperate situations."

162. The experiences of 1991 in dealing with both the situation between Iraq and Kuwait and the Horn of Africa underlined the crucial role of inter-agency collaboration in handling such complex emergency situations. In that context, new modalities of cooperation worked out with NGO partners during the situation between Iraq and Kuwait, in Angola and in Operation Lifeline Sudan have provided good models for future collaboration. UNICEF participation in the Special Emergency Programme for the Horn of Africa and in initiatives formed under the International Decade for Natural Disaster Reduction have

provided opportunities for improved collaboration within the United Nations and with NGOs and other institutions concerned with disaster prevention and preparedness. At the headquarters level, UNICEF was an active participant in inter-agency and intergovernmental discussions to enhance the capacity of the United Nations system to respond to emergencies in a coordinated fashion. It has come to be recognized that UNICEF, as a field-based organization, is engaged in its normal programmes in key activities such as water supply, sanitation and PHC that are of primary importance in emergency situations. Backed by the support structure of the Supply Division warehouse at Copenhagen, UNICEF is able to respond swiftly as soon as disaster strikes.

163. The recent development of crisis situations in Albania, Romania and Yugoslavia, in addition to the fact that the Executive Delegate's Office for Iraq is based at Geneva, have highlighted the need for strengthening the capacity of the UNICEF emergency response capacity at Geneva. In this regard, the Geneva Office will play an increasingly important role both in bringing about enhanced coordination in dealing with specific emergencies and in enhancing general collaborative links with ICRC, the Office of the United Nations Disaster Relief Coordinator (UNDRO), the Office of the United Nations High Commissioner for Refugees (UNHCR), WHO and the League of Red Cross and Red Crescent Societies, as urged by the Executive Board in decision 1991/19 (E/ICEF/1991/15).

164. The most important focus of coordination with other United Nations agencies, bilateral donors and NGOs remains at the field level, where emergency assistance is delivered. Continued support to field offices to enhance their capabilities in dealing with and responding effectively to emergencies has been ensured by the establishment of internal coordination mechanisms. The newly created rapid response emergency team based at Nairobi continues to help provide support to the field in situation analyses and emergency programme definition. At headquarters, the Emergency Office has been strengthened by the addition of two staff members. A system of internal task forces has been established with representatives of all operational units and divisions to handle collaboratively the additional requirements for personnel, technical input, programme support and supplies that are imposed by emergency situations. The task forces meet on a weekly basis to review and report on problems and to provide prompt and effective support to the field. Effective coordination among field offices, the Emergency Office, the geographic sections, the Division of Information and the Supply Division is thus ensured, paving the way, inter alia, for the integration of emergency interventions and regular country programme activities in the affected countries. The challenges ahead are to build systems and programmes that will not only provide immediate relief support, but also exploit the situation to its best advantage to lead towards recovery and development as soon as possible. Such strategies need to be worked out conceptually, simultaneously with emergency and rehabilitation activities.

165. The growing complexities and frequency of both natural and man-made disasters and the importance of organizing training to develop the link between relief and development have been the focus of major policy

orientations within the Emergency Office. Guiding principles for the coming year and for the immediate future will include strengthening field offices' management capacities for emergency planning; the development of early warning systems to predict famine and potential population displacement; the incorporation and integration of disaster mitigation into overall UNICEF programming activities; the enhancement of both government and community capacities to coordinate response mechanisms; and the development of strategies and the strengthening of coping mechanisms through, inter alia, reducing household vulnerabilities. The first of a series of regional training workshops on emergency management for senior field staff was held in November 1991 for the Eastern and Southern Africa region. Two other such workshops are to take place in 1992. A more detailed report of actions taken to implement Executive Board decision 1991/19 (E/ICEF/1991/15) is being submitted to the Board in a separate report (E/ICEF/1992/11).

D. Other programme responses

International Year for the World's Indigenous People

166. In decision 1991/7 (E/ICEF/1991/15), the Executive Board requested the secretariat to report on UNICEF involvement in preparations for the International Year for the World's Indigenous People (1993). During the past year, both the decision and relevant provisions of the Convention on the Rights of the Child have highlighted the situation of indigenous people, and UNICEF has given increased and conscious attention to their needs. Constraints remain, however, in the areas of accessibility, information for policy articulation, technical competence to deal with issues concerning indigenous populations and resource allocations at both national levels and within UNICEF. Special attention has been paid to the subject in the Latin American region.

167. At the regional level, UNICEF is promoting multinational intervention through the subregional programme on sustainable development for children in the Amazon Basin, with the participation of Bolivia, Brazil, Colombia, Ecuador, Peru and Suriname. Basic services for indigenous women and children are being supported through the subregional programme for the Andean region, which includes Bolivia, Colombia, Ecuador, Peru and Venezuela. At the country level, approximately 70 per cent of country programmes in the region are implementing supportive activities benefiting indigenous populations. Given the often sensitive nature of such issues, advocacy and situation analyses are being carefully planned to mobilize political will and support in Bolivia, Brazil, Chile, Colombia, Ecuador, Guatemala, Mexico, Nicaragua, Peru and Venezuela. With UNICEF cooperation, several countries, including Bolivia, Brazil, Chile, Ecuador, Mexico, Paraguay and Peru, are providing support to indigenous organizations for the provision of basic health and education services.

168. Depending on the needs and priorities of individual countries and indigenous groups, the scope of UNICEF-supported activities varies widely, as indicated below:

(a) In Bolivia, UNICEF supports the Government through the Intercultural Bilingual Education Programme in producing bilingual materials, training teachers and refining curricula for the Quechua population at Cochabamba, Chuquisaca, Potosi and Uncia, benefiting almost 2,500 children. Close to 2,000 Aymara children at La Paz and Oruro and 600 Guarani children at Santa Cruz also benefit from the bilingual programme;

(b) In Brazil, the UNICEF strategy includes support for updating information on indigenous groups, the creation of coordination mechanisms among government institutions and NGOs, and support and training to develop human resources. Activities to control malaria and other diseases, as well as to promote and protect the survival of the Yanomama group, are being undertaken with UNICEF support, under the auspices of the United Nations Secretary-General;

(c) In Central America, the Guatemala office has undertaken various knowledge, attitude and practice studies among the Kekchi and the Mam in Guatemala, the Bribri in Costa Rica and the Guaymi in Panama as the basis for adaptation of Facts for Life. Bilingual education is being supported, and dictionaries of four different Maya languages are being produced. Subregional programmes for the provision of education, health and water supply and sanitation services are also being implemented in areas with higher concentrations of indigenous people;

(d) In Chile, UNICEF is supporting the Government in the formulation and design of innovative approaches to provide basic services in the Araucania to benefit the Mapuche and other people living in poverty;

(e) In Colombia, a situation analysis is being conducted to ascertain the situation of indigenous children. UNICEF is also supporting the provision of health services for the Aponte Ingas group in the department of Narino. Negotiations are under way with the Government regarding a basic services programme in areas of indigenous populations in the Colombian Amazon;

(f) In Ecuador, UNICEF is supporting the Government through the subregional programme for the Andean region to provide basic services to indigenous people in six provinces;

(g) In Mexico, in cooperation with the Inter-American Indian Institute and the National Indian Institute, UNICEF supported the translation of Facts for Life into the indigenous languages of Mixteco, Zapoteco, Maya, Otomi and Nahuatl;

(h) In Peru, UNICEF has been supporting the provision of basic services for indigenous populations since 1975. Actions initiated in Puno and Cuzco have been extended into the highland areas of Ayacucho and Huancavelica, as well as the Amazon department of Ucayali. Child survival activities for about 250,000 Cocama-Camilla people located in Ucayali are being supported through UNICEF cooperation with the Federation of Native Communities. In addition, an agreement has been signed with the Inter-Ethnic Association for Development to

provide basic services to nearly 30,000 Aguarima and Huambissa people and to the Ashanica and Shipibo groups also dwelling in Ucayali. The control of cholera and the distribution of ORS packages among these indigenous groups was facilitated by an agreement with the Center for Theological Studies of the Amazonia, a church-related NGO. To promote health education and sanitation, a meeting of 30 shamans and traditional doctors, who have considerable influence among the native population, was held in Iquitos in August 1991. A bilingual, intercultural programme is also being implemented.

Central and Eastern Europe and Chernobyl nuclear accident victims

169. In decision 1991/20, the Executive Board requested the Executive Director to report on the requirements of children in especially difficult circumstances in Central and Eastern Europe; in decision 1991/21, he was asked to report on the situation and support provided to the victims of the accident at the Chernobyl nuclear power plant (E/ICEF/1991/15). The Board, in decisions 1990/5 (E/ICEF/1990/13) and 1991/20, also decided to undertake a limited range of specific, child-related activities in the countries of Central and Eastern Europe undergoing significant political, social and economic transformation. As a result of political liberalization, privatization and the transition to a market economy, safety nets of social services and support for vulnerable groups in those countries have been seriously affected by the decentralization of government structures and by changing economic and social policies, without adequate protection for the poor and the vulnerable. Despite the different historical, national and cultural backgrounds of those countries, certain problems having a negative impact on children and women are common to all of them. They include declining social expenditures on health, education and child care; growing unemployment, especially among women; a sudden and drastic decline in household income; a reduction in household food supplies due, inter alia, to inflation; increasing juvenile delinquency; significant numbers of street children; pressures to reduce child and/or family allowances; the institutionalization of children in inadequate facilities without necessary services; continuing environmental degradation; civil war, ethnic and nationalist tensions; and a general disregard for minority rights. While there are genuine hopes for the future, it is feared that in the short term, with greater social tensions and greater resource shortages over the next few years, the worst is yet to come. For the children of those countries, there is an urgent need to recall the commitments made at the World Summit for Children, particularly that children must have a "first call" for resources in bad times as well as good.

170. As of late March 1992, Central and Eastern European countries that had ratified the Convention on the Rights of the Child include Albania, Bulgaria, Belarus, Czechoslovakia, Estonia, Lithuania, Hungary, Poland, Romania, the Russian Federation, Ukraine and Yugoslavia.

171. Central to the year's activities was a series of country missions to Albania, Bulgaria, Czechoslovakia, Hungary, Poland, Romania and Yugoslavia, undertaken in active cooperation with other United Nations agencies,

international organizations and intergovernmental bodies. The main purpose of the missions was to facilitate the preparation of situation analyses of women and children so as to promote the preparation of national programmes of action as part of follow-up to the World Summit for Children. Subsequently, national multidisciplinary teams have initiated processes for completing the analyses. In each country, study teams including researchers from national research and academic institutions and NGOs are collecting data and carrying out analyses in order to define needs and future actions.

172. UNICEF responded to special and emergency situations in certain countries in the region by initiating a number of activities. In the case of Romania, a special representative established a UNICEF office at Bucharest in January 1991 and is now operating with a team of five Romanian staff. Funding for the two-year programme, just over $4 million, has been provided by the Governments of the Netherlands and the United States, and by three European National Committees for UNICEF. Programme activities include support for emergency supplies of essential drugs, disposable needles and syringes for children up to three years old in institutions; a major training course for institution staff; a study to examine the nutritional status of children; assistance in re-establishing the national health education service; the dispatch of poliomyelitis vaccines; and assistance in establishing an information clearing-house to assess progress and determine future priorities.

173. In the case of Chernobyl, following a mission in June 1991, emergency supplies of iodized oil capsules were dispatched to the affected areas, funded by the German National Committee for UNICEF. UNICEF has contributed to the establishment of an Inter-agency Task Force for Chernobyl, which also includes the Department of Technical Cooperation for Development, the International Atomic Energy Agency, ILO, the United Nations Centre for Human Settlements, UNDP, UNEP, UNESCO, the United Nations Industrial Development Organization (UNIDO) and WHO. UNICEF also participated in a pledging conference organized by the United Nations Office at Vienna. In addition, with funds provided by the German National Committee for UNICEF, emergency drug kits valued at $200,000 were sent to the former Soviet Union as part of the 1991 winter campaign organized by the International Foreign Policy Association.

174. Following an inter-agency mission to Albania in June 1991, comprising representatives of the International Office of Migrations, UNDP, UNICEF, WFP and WHO, and a joint UNICEF/WHO mission in August, UNICEF launched an appeal for $1 million to provide emergency assistance to Albania for six months. The emergency funds received were used to send high-protein food supplements, ORS sachets to treat diarrhoeal dehydration, emergency health kits, needles, syringes and sterilizers. UNICEF and WHO have also sent ARI and EPI missions to Albania.

175. As of 25 November 1991, UNICEF emergency teams were in place at Dubrovnik, Belgrade and Zagreb for evacuating and dispensing relief to displaced populations in Yugoslavia. Assistance provided to other countries in the region included the dispatch of polio vaccines to Bulgaria and technical missions to assess IDD treatment in Czechoslovakia, Hungary and Romania.

176. The democratization process should unleash the creative energies of the peoples of Central and Eastern Europe, and their more dynamic participation in society should accelerate economic and social progress. In the short and medium term, however, there is ample cause for concern. The initial euphoria has now given way to more sober assessments of the difficulties that will be confronted in the transition and adjustment process, which promises to be more painful, costly and prolonged than originally believed. While considerable attention is now being paid to the economic and political problems of the transition and to ethnic conflicts and the rise of nationalism, the process of social reform and the growing social costs of the transition have received far too little attention. In order to focus attention on those serious emerging issues and to fill the relative vacuum of understanding of the impact of the changes on children in Eastern and Central Europe, ICDC has published a book on Children and the Transition to the Market Economy: Safety Nets and Social Policies in Central and Eastern Europe, based on a workshop held at Warsaw, in October 1990. It is hoped that the book will contribute to ongoing national debates on social reform and to the discussion on international aid flows.

Situation of Palestinian children and women

177. In response to Executive Board decision 1991/15 (E/ICEF/1991/15), a situation analysis of Palestinian children and women in the West Bank and Gaza has been prepared. Based on the analysis, UNICEF is submitting to the 1992 Executive Board a three-year programme for the period 1992-1994 for Palestinian children and women in the West Bank and Gaza (E/ICEF/1992/P/L.32). The programme delineates action in the areas of child health, education and children in especially difficult circumstances. In each area, training and institutional capacity-building are important components. The health components to be implemented include EPI, CDD, ARI, nutrition, maternal health and the rational use of drugs. The education programme comprises early childhood development, primary education, literacy and non-formal education. A new five-year programme for Palestinian children in Lebanon is also being submitted to the 1992 Executive Board to continue strengthening ongoing UNICEF activities in the areas of child health, early childhood development, water supply and sanitation and women's development (E/ICEF/1992/P/L.28). Since the facilities and services in displacement centres are inferior to those available to camp populations, the underserved centres will receive special attention. Another major priority in the new programme will be the development of more reliable baseline data on the situation of Palestinian children and women in Lebanon.

178. During the past year, the situation between Iraq and Kuwait had profound effects on Palestinian communities in the region, including the return of hundreds of thousands of people to Jordan. The loss of remittance income, high unemployment and increasing poverty have almost universally affected Palestinians in the West Bank and Gaza, Jordan, Lebanon and the Syrian Arab Republic. In response, UNICEF activities in 1991 stressed health, education and women-centred programme components. While UNICEF continues to work closely with the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA), increased attention is also being paid to fostering

community action and exploiting more fully the extensive network of NGOs and other grass-roots organizations in the Palestinian community. Social mobilization activities continue to be supported, particularly with regard to media promotion of health education materials.

179. In the health sector, one of the main thrusts of UNICEF cooperation with UNRWA has been providing material assistance to help UNRWA cope with the increased demands on its health programmes. In addition to the continued provision of vaccines, syringes, cold-chain equipment and ORS, material assistance was extended to include paediatric antibiotic syrups for ARI control and essential drugs in the West Bank and Gaza, Jordan, Lebanon and the Syrian Arab Republic. Support for training health workers also received high priority, in cooperation with international and Palestinian associations. Support for rehabilitation work has continued. In Jordan, UNICEF provided specialized testing equipment to the Disability Detection and Rehabilitation Centre, located at Bequa camp, and trained staff at the Centre so that they, in turn, could train mothers in the early detection of disabilities. The joint UNRWA/UNICEF emergency physiotherapy programme has continued to evolve, with five centres now operating at Gaza and two in the West Bank. Since 1988, 4,500 patients have received physiotherapy rehabilitation for physical injuries.

180. Health sector activities were supported through increased emphasis on the creation of a more stimulating learning environment for young children and on the promotion of early childhood development activities and expanding child-care activities. In Lebanon, 22 modest new child centres were established and 24 others rehabilitated in cooperation with Palestinian associations, bringing the total to 83 centres serving 7,760 children. In Jordan and the Syrian Arab Republic, the focus was on enabling mothers to better meet the development needs of their children, training Palestinian kindergarten teachers and early childhood development specialists, and providing learning materials and equipment to UNRWA and NGO kindergartens. UNICEF also cooperated with UNRWA in two projects involving the development of proper classroom diagnostic testing, associated remedial education and the development of distance learning techniques and materials in order to respond to the acute problem of declining achievement levels of children in primary schools in the West Bank and Gaza. In addition, the UNICEF education for peace programme in Lebanon continued to attract large numbers of Palestinian children.

181. UNICEF continued to support women's literacy and income-generating activities, including collective and individual self-support projects in Lebanon; women's literacy, health education and vocational training courses in Jordan; and women's income-generating projects that produce toys and games for use in kindergartens in the Syrian Arab Republic. Traditional UNICEF support for water supply and sanitation activities in camps and displacement centres has also continued, particularly in Lebanon, in cooperation with UNRWA. It is hoped that the new programmes submitted this year will improve substantially the capacity of Palestinian communities in the region to meet the health, education and development needs of their children.

International Year of the Family

182. As stated in the Convention on the Rights of the Child, UNICEF believes that "the child, for the full and harmonious development of his or her personality, should grow up in a family environment" and that "the family as the fundamental group of society and the natural environment for the growth and well-being of all its members, particularly children, should be afforded the necessary protection and assistance so that it can fully asssume its responsibilities within the community". The Summit Plan of Action also specifies that "the family has the primary responsibility for the nurturing and protection of children from infancy to adolescence ... for the full and harmonious development of their personality, children should grow up in a family environment, in an atmosphere of happiness, love and understanding. Accordingly, all institutions of society should respect and support the efforts of parents and other caregivers to nurture and care for children in a family environment".

183. UNICEF welcomed the proclamation of the International Year of the Family for 1994 and has been participating actively in preparations for the Year. It is working closely with the United Nations Centre for Social Development and Humanitarian Affairs in Vienna, the coordinating agency for awareness-raising about the Year, and on the development of related products through the UNICEF greeting card and related operations (GCO). An internal policy review is also being undertaken to ensure that UNICEF programmes of cooperation support family life, including the often neglected role and responsibility of the father, because strong families are the first line of defence for children.

E. Other supporting activities

Programme evaluation

184. The number of completed evaluations, as shown in table 6 below, continues to be significant despite a modest decrease (8 per cent) in 1991 as compared to 1990. This reflects the trend of more evaluations combining two components, such as EPI and CDD, that previously would have been done separately. In the Asia region, the shift of Bangladesh and Pakistan from the East Asia and Pacific Regional Office to the South Asia Regional Office resulted in changes in the relative number of evaluations in those two regions. Regarding other regions, particularly the Middle East and North Africa, the completion of EPI coverage surveys at the provincial level resulted in the decreased number of evaluations carried out.

Table 6. Evaluations completed

(October 1988-September 1991)

Regional office	1989	1990	1991
East Asia and the Pacific	34	50	24
Eastern and Southern Africa	52	67	41
Middle East and North Africa	141	44	20
South Asia	25	25	36
Americas and the Caribbean	32	24	60
West and Central Africa	38	38	48
Total	322	248	229

185. In order to improve the process of information documentation and dissemination, efforts are under way to upgrade the function and uses of the current evaluation database. A pilot full-text relational database has been developed and tested with the aim of capturing the information most relevant to UNICEF that emerged from the evaluation processes. The information will then be shared with those taking part in subsequent evaluations and project reviews.

186. In 1991, a UNICEF manual was published in order to rationalize and consolidate the guidelines for monitoring and evaluation. The manual updates the guidelines issued in 1986 as a result of a 1984 Executive Board request (E/ICEF/1984/12). The manual has been designed to support the institutionalization of evaluation and its role in improving programme development and implementation.

187. An ongoing collaborative process is now under way in which the Evaluation Office is working with the relevant Programme Division clusters in documenting lessons learned through thematic "desk-top" reviews of emergency, immunization, CDD, women in development, urban basic services and water supply and sanitation programmes. The results are included in a separate report to the Executive Board (E/ICEF/1992/L.9). In addition, an eight-country, thematic evaluation of UNICEF-supported growth monitoring programmes has been undertaken in collaboration with the Programme Division Nutrition Cluster. The results of the exercise will be presented at a workshop later in 1992. The processes will be continued and strengthened with the results serving as a basis for: (a) learning lessons relevant to global policy and strategy

development from existing country office evaluations; (b) developing more effective mechanisms to maximize the use of evaluations in the technical assistance provided by UNICEF; and (c) contributing to the establishment of a formal, three-year global evaluation rolling plan for UNICEF in order to assure that the key policy and strategy areas critical to UNICEF collaboration in the 1990s will be acted upon.

188. In Latin America, it was decided to do an evaluation of the cholera outbreak and the use of ORT. It is a collaborative effort of the Evaluation Office and the Child Survival Unit of the Programme Division. An evaluation of Peru and perhaps one or two other countries will be undertaken over the next year to investigate ORT use in the management of the cholera pandemic.

189. The Evaluation Office continued to encourage exchange of experiences to improve skills in monitoring and evaluation. The Evaluation Newsletter, which is produced in English and French and is a forum for sharing lessons and information on good evaluations and other substantive matters, continues to enjoy wide readership from UNICEF, United Nations agencies and external institutions. A regional staff training workshop integrating programming and evaluation was held in Ibadan, Nigeria, for 24 participants from English-speaking countries of the West and Central Africa region. The workshop aimed to expose participants to evaluation techniques, train them to plan better and manage evaluation activities and to emphasize the functional link between monitoring and evaluation and the programming process. The Evaluation Office also hosted meetings of the Joint Panel on Monitoring and Evaluation and of the Peoples' Participation Task Force on Integrated Rural Development of the Administrative Committee on Coordination, during which discussions and documentation focused on promoting participatory evaluations and exchanging experience on techniques being used.

190. As part of including the systematic use of evaluations in the country programming process, the country programme recommendation is now required not only to include the list of evaluations completed, but also to outline evaluation plans as part of the new country cycle.

Social mobilization and advocacy

Programme communication

191. As a result of the important role played by communication and social mobilization in the success of UCI and the promotion of ORT, UNICEF offices are moving to adapt such techniques and related efforts to the challenges posed by the goals for the 1990s and the provisions of the Convention on the Rights of the Child. Many are finding that the process has challenging implications. For example, mobilizing support around the issue of the girl child in a traditional culture or around the complex issues of improving educational attainment is very different from the intense, time-bound mobilization that marked many immunization efforts, or from the social marketing of products such as ORS. In a number of instances, new challenges have also emerged. In Jordan, for example, a safe motherhood campaign is addressing child spacing for the first time in that country.

192. Adapting communication and mobilization to new challenges also requires re-evaluating programme strategies of the concerned sectors. As a result of such a process, Uganda is supporting efforts to find out more about people's attitudes to disease, particularly AIDS, and the part communities could play in their own health care. These efforts have resulted in a decision to replace approaches based on "blanket" coverage health education with more interactive communication methods aimed at specific population groups. The AIDS pandemic has made behavioural change an absolute requirement. Moreover, the kind of intensive research mentioned above is vital to the development of effective materials and message development, but it is sometimes skimped or overlooked entirely. One exception was an NGO publication, Living with AIDS, which the UNICEF office in Uganda helped to fund and which received wide acclaim after an 11-month process of consultation and review by intended users and audiences.

193. While UNICEF generally has greatly increased its use of alliances over the past decade for specific purposes such as UCI, the challenge now is to sustain the interest in children and in even more involvement to improve and further the effectiveness of those alliances. For example, in some countries popular performers or creative individuals are encouraged to form associations with a clearer plan for using their talents in support of longer-term programmes and communication emphasis in order to reach a larger proportion of the population. An example of the value of using local languages is Radio Rurale in Guinea; communities provide the content of the broadcast, which differs by geographic or linguistic regions. People from the community compete in storytelling, riddle contests, singing and other performances that transform the subject matter into a powerful mixture of entertainment and between-the-lines instruction. Journalists and broadcasters in the programmes become animateurs rather than observers. They acquire necessary skills in an on-the-job training programme lasting nine months.

194. The emphasis on interactive communication as an essential element of behavioural change has found expression in many countries' use of theatre groups and community-level performances of drama, comedy, song and dance to convey messages and stimulate discussion, as in Angola, Egypt, the Gambia, India, the Philippines and Uganda. In India, the experience was amplified by writers and producers who visited the communities and used the ideas and materials for later broadcasts. In Uganda, an AIDS drama competition in primary schools triggered discussions of social issues bearing on the prevention of the disease. Involving an estimated 2 million participants country-wide, the competition was used by NGOs to reinforce community education initiatives and helped to link schools with the community in AIDS-prevention education.

Non-governmental organizations

195. In 1991, NGOs continued to play a vital role in working towards the implementation of the Convention on the Rights of the Child and accomplishment of the Summit goals. UNICEF worked closely with international and national NGOs in organizing an NGO forum which focused on meeting those goals and on

priority support for Africa in the decade ahead. Some 113 NGOs from 42 countries produced the Kadoma Declaration, affirming their commitments to attaining the goals of the Summit Plan of Action, the Convention on the Rights of the Child and the OAU Charter on the Rights and Welfare of the African Child.

196. UNICEF also met with the chief executive officers of major international humanitarian and development NGOs to explore further the role their organizations will play in reaching the Summit goals. The mobilization booklet that resulted, World Summit for Children: Moving from words to action, is available in English, French and Spanish and outlines action points for NGOs. It will be distributed to the more than 500 NGOs that signed the joint NGO statement at the World Summit for Children. It was also decided to hold an annual meeting of heads of development and humanitarian NGOs to monitor progress by both Governments and NGOs towards meeting the Summit goals. UNICEF collaboration in the International Model United Nations organized by Junior Chamber International (JCI) and in the World Scout Jamboree held in the Republic of Korea were equally effective in mobilizing youth leadership in support of the Summit goals, the Convention and the environment. Elsewhere, UNICEF organized a nutrition strategy workshop for NGOs, including the Cooperative for American Relief Everywhere, Inc. (CARE), La Leche League, Save the Children Fund, Helen Keller International and the World Young Women's Christian Association, which are working towards accomplishing the Summit goals in that sector.

197. UNICEF worked closely with NGOs in 1991 to respond to emergency needs created by the situation between Iraq and Kuwait and to the growing role of NGOs in Eastern Europe. The NGO/UNICEF Coordinating Committee on Activities for Children in Eastern and Central Europe coordinated information and organized joint activities, thus helping to maximize the effectiveness of programmes for children in the region.

198. UNICEF also worked closely with NGO groups and coalitions concerned with children in armed conflict, women and development, youth mobilization and the reduction of gender disparity in education. As a result of the work done by the NGO Committee on UNICEF among United Nations agencies and NGOs, the issue of girls' access to education was added to the agenda of the Consultative Forum on Education for All, held in Paris in December 1991. Briefings were organized for NGOs working in emergency situations, both in the Middle East and the Horn of Africa, to share information and to establish networks for the rapid dissemination of information.

199. Intensified collaboration with NGOs in the support, protection and promotion of breast-feeding was also initiated in 1991. Following its launch, the World Alliance for Breast-feeding Action, a new umbrella NGO organization, immediately became an important partner in helping to promote and increase breast-feeding rates. The alliance is playing a leading role in mobilizing NGOs around the "baby-friendly" hospital initiative. Elsewhere, UNICEF worked with NGOs to ensure that issues concerning children and the environment were included in the agenda of the United Nations Conference on the Environment and Development.

200. UNICEF continued long-term programmes of global cooperation with NGOs such as JCI and Rotary International. The latter was particularly acknowledged for its leadership in the achievement of UCI by 1990. Junior Chamber of the Americas, PAHO and the UNICEF Americas and the Caribbean Regional Office agreed to collaborate on efforts to expand the capacity of Latin American countries to manufacture and distribute ORS packets and information on their use.

Parliamentarians, religious leaders and mayors

201. Recognizing the important contribution parliamentarians can make in marshalling political will in support of children, UNICEF seeks strong working ties with parliamentarians at global, regional and national levels. During 1991, strong links with parliamentarians influenced legislative and budgetary priorities, aroused public opinion, motivated opinion makers and generated the political initiatives necessary to implement a child-centred agenda.

202. Parliamentarians have played a crucial role in the process of ratifying the Convention on the Rights of the Child and are key participants in its implementation and monitoring process. Collaboration with international parliamentary organizations provides opportunities for advocacy among parliamentarians to further the cause of children. In addition, members of these organizations can utilize their vast networks to disseminate information on children's issues to their constituents.

203. Close collaboration with the Global Committee of Parliamentarians, the Global Forum of Parliamentarians and Religious Leaders, the Inter-Parliamentary Union (IPU), the Inter-American Parliamentary Group on Population and Development and the Commonwealth Parliamentary Association has resulted in far-reaching resolutions aimed at benefiting children. In particular, a major advocacy effort was made at the IPU meeting at Pyongyang in April 1991.

204. UNICEF continues to work with religious leaders, particularly as part of follow-up to the 1990 World Conference on Religion and Peace, at which 12 major religions were represented by 150 participants from 40 countries. Similarly, a new international initiative on "mayors as defenders of children" was launched in Rome in September 1991, followed by an international colloquium of mayors at Dakar in January 1992 (see para. 152 above).

Public advocacy

205. UNICEF Goodwill Ambassadors Sir Peter Ustinov, Liv Ullmann and Harry Belafonte continued their strong advocacy efforts on behalf of UNICEF during 1991. Audrey Hepburn supported activities of National Committees in several countries, hosted the UCI ceremony at United Nations Headquarters and joined the Executive Director at the launch of the State of the World's Children report in Brussels. Tetsuko Kuroyanagi's mission to Iraq in July generated excellent media coverage in Japan, where she successfully raised an unprecedented $1.2 million in contributions.

206. Three new special representatives were appointed by the Executive Director in 1991. Sir Edmund Hillary, explorer, author and conqueror of Mount Everest, was appointed Special Representative for the Children of the Himalayas in March. He visited UNICEF-assisted projects in Nepal and provided advocacy support to National Committees at Tokyo and Toronto. In April, Senegalese musician Youssou N'Dour was named Special Representative for the Performing Arts and assisted UNICEF initiatives throughout Senegal. Immediately following his appointment as Special Representative for the Film Arts in August, actor Roger Moore began an advocacy mission to Guatemala, Honduras, El Salvador and Costa Rica. In each country he met with the President, visited UNICEF-assisted projects and presented media prizes to journalists for outstanding coverage of children's issues. He later visited Brazil, where he met with President Collor de Mello and parliamentary leaders to commend them on Brazil's incorporation of the Convention's principles into its Constitution.

207. In addition to numerous other activities, Special Representative Julio Iglesias gave a UNICEF benefit concert at Manila in December, while Special Representative for Sports Imran Khan provided strong support to a special children's immunization initiative in the United Kingdom.

208. OAU declared 16 June as the Day of the African Child and requested UNICEF assistance in promoting its first observance. Activities in Africa and other countries involved heads of State, government ministries, NGOs, religious leaders, parliamentarians, teachers, the media and children. Those taking part included Harry and Julie Belafonte, Roger Moore, Mayor Mamadou Diop of Dakar, Mayor and Mrs. David Dinkins of New York City, Mrs. Matilda Cuomo, wife of the Governor of New York State, Manu Dibango, Ali Mazrui, Tsegaye Gabre-Medhin and Bishop Paul Reeves. In addition, 48 of the 51 States members of OAU held important national commemorative activities. At United Nations Headquarters, UNICEF organized an exhibit entitled "Africa's Children: Africa's Future" as well as a "Celebration of the African Child", which involved 650 students and 200 teachers from local area schools and highlighted African art, dance, music, poetry, customs and dress.

209. The fourth annual Danny Kaye International Children's Awards Show took place in September in the Netherlands and was hosted by Audrey Hepburn and Roger Moore. At the International Football Federation's All-Star Soccer match in Munich, Mr. Moore was presented with a cheque for $1 million for UNICEF. The city of Wiesbaden presented Miss Hepburn with a cheque for $1.3 million, which was the result of a year-long campaign in support of UNICEF.

Intergovernmental organizations

210. Advocacy with intergovernmental organizations in 1991 focused on mobilizing international support at the highest political levels for the implementation of the Declaration and Plan of Action of the World Summit for Children. Commitments to achieving the Summit goals were made by the heads of State or Government attending summits of OAU, the Ibero-American countries, the Commonwealth, Francophone countries, the Organization of the Islamic Conference and SAARC.

211. In expressing support for Summit follow-up, the meetings typically urged member Governments to prepare national programmes of action and to mandate cooperative action for their implementation. For example, leaders attending the Ibero-American Summit, in committing themselves to actions necessary for achieving the Summit goals, specifically called for the preparation of national programmes of action designed to promote the survival, protection and integral development of children in their countries. The OAU resolution on Summit follow-up called for the convening of an international donors' conference in support of African children and asked for UNICEF assistance in the endeavour. The SAARC Summit agreed to convene the Second Conference on South Asian Children in 1992. At a meeting in Colombia in May, Latin American First Ladies signed a declaration in support of the Summit goals and child rights. In addition to the leverage provided by formal resolutions, the actual process of collaboration with heads of State or Government and their staffs serves to reinforce commitment to the Summit goals not only within the intergovernmental framework, but also by political leaders themselves.

212. Several other intergovernmental meetings, including the Francophone and Islamic Summits, mandated meetings at the expert or ministerial level to consider implementation of the World Summit Programme of Action by their members. Such meetings will provide further opportunities to encourage specific measures for Summit follow-up at national and international levels.

Education for Development

213. In 1991, UNICEF organized four major international workshops to familiarize participants with the ideas and methods of Education for Development, to explore their relevance and practical application to different cultures and educational systems and to examine ways in which international links and experience exchanges could be forged. The meetings took place at Thonon, France (for National Committee education officers), Nairobi (with National Committee education officers and East African educators), Barcelona (for National Committees in the Mediterranean region and UNICEF personnel and educators in the Middle East and North Africa region) and Budapest (for National Committee staff and educators in Central and Eastern Europe).

214. There was also an extensive consultation process throughout the year to help develop a common framework and goals to guide all UNICEF Education for Development activities. The process involved visiting National Committees, seeking the opinions of UNICEF colleagues at headquarters and in regional offices, consulting with other United Nations agencies, especially UNESCO, holding discussions with key NGO and major bilateral partners and consulting with relevant professionals from the educational community. A separate policy paper on Education for Development will be presented to the 1992 Executive Board (E/ICEF/1992/L.8).

Information

215. The Division of Information continued to play an active role in United Nations system-wide coordination through the Joint United Nations Information Committee. The Division also contributed to "brainstorming" sessions that led to the revamping of Development Forum, a publication of the Department of Public Information of the United Nations Secretariat. Through the Office of the Secretary-General of the United Nations Conference on Environment and Development, the Division took part in the preparation of the media and information activities leading to the Earth Summit.

216. UNICEF worked with WHO in planning all media and information activities leading to the UCI announcement in October. In December, UNICEF collaborated with FAO and WHO on the micronutrients conference at Montreal, Canada; it also provided media and information services on behalf of WHO and UNDP at the international conference on ARI at Washington.

Media relations

217. Two concerns dominated the information and media work of UNICEF in 1991: support for efforts to translate the Summit goals into specific field action; and promotion of greater awareness of the children's rights enshrined in the Convention on the Rights of the Child.

218. Adding to the pressure was a series of emergencies that began with the situation between Iraq and Kuwait, including early population displacement and conflict and its aftermath. The situation in Africa, particularly in the Horn of Africa, Liberia, Mozambique and Angola, also demanded the attention of the Division of Information. A massive cyclone in Bangladesh, cholera epidemics in Peru and neighbouring countries and civil war in Yugoslavia numbered among other major flare-ups on the emergency front.

219. Because UNICEF was involved in an unprecedented number of emergencies throughout the world in 1991, there was a need for increased coordination and information flows with both field offices and National Committees. In response, the Division of Information issued the largest number of "Emergency Information Notes", detailing UNICEF emergency response in countries such as Angola, Bangladesh, Ethiopia, Liberia, Peru, Somalia and Yugoslavia. During 1991, staff from the Division made short visits to major emergency sites to support programmes in the Middle East, Angola, Liberia, Albania, Hungary, Poland and Yugoslavia.

220. Because of the situation between Iraq and Kuwait, international media attention, triggered by the early assistance provided by UNICEF in Jordan, the Islamic Republic of Iran, Turkey and the Syrian Arab Republic as those countries made preparations for massive influxes of refugees and later to displaced Kurds in Turkey and the Islamic Republic of Iran, was the most intensive in many months. The joint WHO/UNICEF mission to Baghdad at the height of the situation resulted in widespread media coverage. The accessibility to the media of UNICEF senior staff, at headquarters but

particularly in the field, both was appreciated by reporters and was reflected in the large number of television, radio and print dispatches about UNICEF activities.

221. Also of interest to the media and public world wide was the achievement of UCI and the condition of children in Central and Eastern Europe as countries in the region moved towards market economies.

222. The ceremony marking the achievement of UCI was a culmination of extensive collaboration between WHO and UNICEF. Prior to the event, UNICEF, in cooperation with European National Committees, organized media field trips to Nigeria and Bangladesh, and with WHO, produced an information kit in three languages that was much in demand. The UCI announcement itself generated extensive media coverage around the world. The UNICEF video news release had a television audience of 13 million people in the United States alone. Stories appeared on major television networks in countries including Australia, France, the United States (the American Broadcasting Corporation (ABC), the Columbia Broadcasting System (CBS), Cable News Network (CNN) and Univision) and Switzerland.

223. In support of UNICEF work with Central and Eastern European Governments, staff from the Division of Information in Geneva and New York took part in assessment missions to countries in the region to help to devise information and advocacy strategies and to call attention to the plight of children. The missions produced numerous articles and photographs for use by the media and NGOs. ICDC and the Division also helped to organize an international media workshop in March on the impact of environmental degradation on children in Eastern and Central Europe.

224. In September, UNICEF and the Italian international energy and chemicals conglomerate ENI held a joint news conference in New York to announce that ENI would fund a pilot project to advance children's health in third world countries and to invite the world's leading industrial groups to join efforts to give children a better future.

225. Two other initiatives - for "baby-friendly" hospitals and the elimination of micronutrient deficiencies - generated considerable media attention in 1991 and both are expected to gain momentum throughout 1992. Also dominating UNICEF media and information activities were preparations for the United Nations Conference on Environment and Development.

State of the World's Children report

226. The 1992 State of the World's Children report outlined 10 propositions for ensuring children's survival, protection and development as the world moves towards a new world order. The report was launched at the International Press Centre at Brussels on 19 December. Despite other major developments in the Belgian capital involving the North Atlantic Treaty Organization (NATO) and the European Community (EC), the launch was well attended and the report received good media world-wide coverage. Goodwill Ambassador Audrey Hepburn joined the Executive Director at the launch.

227. The Worldwide Television News (WTN) transmitted a special satellite report for UNICEF to North America and Australia, which was picked up by scores of networks and stations, including ABC, CBS and CNN. Additional WTN coverage also reached wide audiences in Europe via major networks in Britain, France, Italy and Belgium. The strong media attention confirmed yet again that the report, now in its twelfth year, has become, as Japan's Asahi Evening News put it, "one of the leading benchmarks of human progress". In Japan, for instance, 68 per cent of parliamentarians said they read the report.

228. Many UNICEF offices and National Committees augmented the global coverage with their own press briefings and related events involving heads of State or Government. Presidents made presentations in Bolivia, Ecuador, the United Republic of Tanzania and Zambia, as did the Prime Ministers of Jordan, Pakistan and Turkey. In the United States, former President James Earl Carter introduced the report at a news conference in Atlanta. The United States National Governors' Association commended the report to all state governors. Among key events in Europe, the Italian National Committee reported the best coverage ever with 32 briefings country-wide. In London, the Deputy Executive Director, Programmes, gave a briefing on the eve of the launch to NGO representatives and selected members of the press.

Broadcasting and video

229. In the area of broadcasting and video, UNICEF developed a two-tier strategy to help achieve the priority goals set by the World Summit for Children and to complement its traditionally active role in the co-production of advocacy-related, audio-visual materials.

230. Recognizing the importance of partnership for more effective advocacy, UNICEF launched a major effort to broaden its support base in the broadcast industry. The Executive Director challenged top media executives from around the world to recognize the needs of children in today's emerging new world order. His address to the International Council of the American Academy of Television Arts and Sciences has sparked a movement towards an international day of broadcasting for children.

231. The second tier of the strategy was designed to strengthen the role of the electronic media as an essential component in programme delivery. UNICEF established a video clearing-house for field-produced television materials at the School for Public Health and Tropical Medicine, Tulane University (United States). Until now, many creative and useful programmes produced by UNICEF country offices were used only in those countries. The clearing-house reviews and catalogues the videos and publishes the results in a newsletter, offering vital information on innovative media techniques and other programme developments to UNICEF offices and National Committees.

232. In another landmark development, UNICEF has joined the Children's Television Workshop (United States) and Televisa (Mexico) in a multi-million-dollar project to provide superior early childhood television programming. The series of 130 segments, entitled Plaza Sesamo, is a

Spanish-language adaptation of the renowned children's series Sesame Street, which is now seen in over 65 countries. The new series will emphasize issues related to the Convention on the Rights of the Child and Facts for Life. UNICEF also continued to assist field offices with consultant services from the Walt Disney Company and Hanna Barbera Productions for the design of animated educational television features for use in the Caribbean, Latin America and South Asia. These activities were a direct outgrowth of the 1990 Animated Film for Development Workshop in Prague.

233. UNICEF continued to maintain a close working relationship with the Television Trust for the Environment, United Nations Television Service, CNN and other satellite television news agencies, and established new ties with other networks including Vatican Radio, co-producing a programme from Africa.

234. The Division of Information produced advocacy videos for the "baby-friendly" hospital initiative, the Bamako Initiative, UCI and the Day of the African Child, including a series of promotional television spots for CNN. A special series was also produced on the Child-to-Child Trust, the winner of the 1991 Maurice Pate Award. A new radio pack on children and AIDS, prepared with the World Service of the British Broadcasting Corporation, was also made available.

235. For the second year in a row, in 1991 UNICEF distributed more than 5,000 video cassettes (an increase of 15 per cent over 1989), to broadcasters, country offices, National Committees and NGOs, including a massive dissemination of "One Day in September", the video report of the World Summit for Children. The Division also published a new audio-visual catalogue and put the finishing touches on the computerization of the television footage library.

Publications

236. In the area of publication, 1991 was marked by intensified efforts to produce more core materials in languages other than English in order to increase outreach. All major publications were thus issued in English, French and Spanish and support was given for regionally tailored Arabic versions.

237. A major new publication, First Call for Children, was launched in 1991. Intended as a forum for experience exchange and advocacy among national and international opinion leaders, the quarterly has replaced Intercom and African Kora and has a combined readership in English, French and Spanish of nearly 60,000. The publication devotes at least two pages of each issue to subjects of particular concern to NGOs and is also sent to readers of the discontinued NGO newsletter, Action for Children. The Arabic version includes items that focus on the Middle East and North Africa region.

238. In response to the needs of National Committees, several kits were produced on priority areas of UNICEF work. The education kit focused on various aspects of the organization's new policy in the area; the environment kit illustrated efforts to emphasize children's needs in environmental

protection activities; and the two kits marking the annual Day of the African Child underlined the positive developments under way in Africa, so as to balance the usually overly pessimistic portrayal of the continent.

239. In addition to the above-mentioned kits, materials produced to highlight the UNICEF environment policy included leaflets and the text of the speech by the Deputy Executive Director to the Earth Summit Preparatory Committee. To help promote the "baby-friendly" hospital initiative, the Division of Information published an illustrated leaflet aimed at opinion leaders and the general public.

240. UNICEF published and distributed an updated version of "Children and AIDS: An Impending Calamity" and "Report on a Meeting on AIDS and Orphans in Africa", both written by Maggie Black.

241. As part of follow-up to the Summit, over 100,000 copies were printed in English, French and Spanish of a pocket book containing the texts of the Summit Declaration and Plan of Action and the Convention on the Rights of the Child. There was great demand for the books by NGOs, the general public and National Committees. In response to field requests, the Division published Words and Images, an advocacy book that reproduced newspaper cuttings and television images from over 80 countries in more than 20 languages, reflecting the world-wide media coverage of the Summit.

242. UNICEF also contributed to the production of three inter-agency information kits: on UCI, with WHO; on micronutrients, with the Task Force on Child Survival and WHO; and on the Horn of Africa, as part of the Special Emergency Programme for the Horn of Africa. In addition, the Education for Development newsletter, EDev News, appeared every three months throughout the year.

243. The Division of Information strengthened its photo operation in 1992 in response to recommendations contained in the external relations evaluation. The creation in 1992 of a new post of photo editor was approved to head an expanded Photo Unit, as was the acquisition of a photo-image database system to increase efficiency, accuracy and responsiveness in serving the needs of field offices, National Committees and the media.

244. In 1991, more than 1,000 new black-and-white and colour photographs were acquired and more than 34,000 prints and slide transparencies were distributed. Subject areas covered all major regions in the developing world, as well as emergency situations in Central and Eastern Europe.

245. UNICEF photographs were key components of most publications of the Division of Information and of major exhibitions at United Nations Headquarters on the Day of the African Child and UCI.

246. A special six-minute audio-slide presentation was prepared for the 8 October UCI ceremony at United Nations Headquarters. In response to numerous requests, the presentation was transferred to video for distribution

to National Committees and UNICEF offices as a contribution to sustained advocacy for UCI.

Information and communication capacity-building

247. UNICEF sharply increased its efforts towards capacity-building for staff and for partner agencies. The Division of Information published a UNICEF audio-visual handbook, a comprehensive guide to broadcast services offered through the organization. A television training course was designed with international training institutes to meet UNICEF needs. The first radio training seminar sponsored by UNICEF and Radio Netherlands was held at Harare.

248. The Global Communication Support Fund, approved by the 1990 Executive Board (E/ICEF/1990/P/L.33) became fully operational in 1991. The fund has spurred the development of innovative, replicable prototype projects or materials in support of UNICEF programmes with global, regional or subregional impact. Activities supported by the fund included training workshops, such as the above-mentioned workshop for radio producers in eastern and southern Africa; a workshop on animation held in the Caribbean, with the help of animators from the Walt Disney Company; a workshop held at Rio de Janeiro, Brazil, for Latin American soap opera scriptwriters; animated film productions in Ecuador and Bangladesh; and the Plaza Sesamo project for 18 Spanish-speaking Latin American countries.

249. Regional and country offices were also developing several other projects for implementation in 1992 and beyond. They included an animated film series on the rights of the child for Latin America, a rural radio project in West Africa and a training workshop in Asia on the production of creative health messages for radio, as well as other workshops in Asia on the management and production of communication materials and the use of traditional media for social development.

250. A survey of media training institutions conducted by the Division of Information called for UNICEF involvement in training programmes for journalists in developing countries and the development of a media training module on CSD issues for use in both industrialized and developing countries. Working with the Training Section, the Division provided training in presentation and media skills to senior staff and representatives in New York.

251. In accordance with relevant Executive Board decisions and the findings of the external relations evaluation, new emphasis was given to the monitoring and evaluation of UNICEF advocacy mobilization and education efforts through public opinion polls. Several National Committees had also requested guidance in setting up research surveys in their countries. Such survey research can also contribute to sharpening the focus of advocacy and fund-raising activities and to developing information strategies based on more accurate targeting of audiences. The Division of Information, with the help of an outside expert and in consultation with all external relations divisions, the Evaluation Office and National Committees, prepared a programme of research for opinion polling for UNICEF for implementation in selected industrialized countries in 1992.

Electronic information

252. The UNICEF Global Electronic Information and Communications Network, UNET, expanded its services in 1991.

253. UNET, which links UNICEF staff at headquarters and in field offices with National Committees and some NGOs through their computers via telephone lines, contains both bulletin boards and databases of materials on UNICEF activities and programmes, as well as databases of other United Nations agencies. Globally, the total number of electronic mailboxes increased to 400, from 300 in 1990.

254. Two surveys were taken in early 1991: a global information survey by the Division of Information and an external relations analysis by the Information Resources Management Section. Both pointed to the need for improving technology, editorial content and staff training. As a result of the surveys, in December 1991, an interdivisional task force was established to analyse technical and financial support needed to improve the system.

255. An electronic bulletin board and conference facility, known as INTERCOM, was set up for all staff involved in education for development and a feasibility study was carried out, involving a small number of users. Their experiences will form the basis of a special training programme for other users.

National Committees for UNICEF

256. National Committees for UNICEF continued to provide vital support to UNICEF, contributing approximately 20 per cent of its general resources, principally through sales of greeting cards and private sector fund-raising. National Committees also responded quickly to emergency appeals by providing additional funds, especially for Africa and Central and Eastern Europe. They developed new activities related to the Convention on the Rights of the Child and follow-up to the World Summit for Children by mobilizing public opinion, decision makers and children. In this context, they carried out educational activities and disseminated information. Several participated in the implementation of the Convention and Summit Plan of Action in cooperation with national NGOs, child-family institutions and national and local authorities.

257. Strengthened collaboration between the UNICEF secretariat and National Committees during 1991 also resulted in closer consultation at the National Committees' Annual Meeting, with a special session on aspects of implementation of the Convention, standing group sessions and workshops. During a post-Summit meeting at Geneva in January, and in effective small-sized meetings at the end of the year, National Committees met with UNICEF officials in a renewed effort for common planning and coordination. The volunteer coordinators of National Committees followed up on their previous efforts to improve the network of volunteers for UNICEF in industrialized countries.

258. Special attention was paid to the new realities in which National Committees in several Central and Eastern European countries must operate, and where further assistance will be needed. Wherever possible, in 1992 care must be taken regarding the creation of new National Committees in Central and Eastern Europe, as well as in the new industrial countries in Asia.

259. In the areas of information and education for development, UNICEF took concrete steps to help define policies for the organization and to strengthen coordination among headquarters, the National Committees and field offices. The information/education for development officers of National Committees participated in the biennial information workshop held at Nairobi in June. The workshop, held for the first time in a developing country, was also attended by UNICEF information officers in the region, programme resource staff and several journalists. It produced a series of practical steps to facilitate information sharing and proposed guidelines to project accurate images of human development in general and in Africa in particular. Other agreements called for the drafting of guidelines for media field visits and for the "twinning" of National Committees and UNICEF country offices for more effective support of country programmes and information exchange.

260. Subsequently, selected UNICEF staff from western and central Africa meeting at Bassam, Côte d'Ivoire, drafted a plan of action to facilitate the North-South information flow and to promote a positive image of "underexposed" countries to National Committees.

261. In still another effort to increase collaboration and coordination, National Committee information officers and staff from the Division of Information held their first annual joint work-planning meeting at Evian, France, in November. The participants, who also included senior regional external relations officers, produced a joint information work plan for 1992 covering 10 substantive areas of concern to UNICEF.

Fund-raising

262. The context for resource mobilization has dramatically changed during the last year and presents challenges and some important opportunities to UNICEF.

263. The World Bank foresees only a modest growth in international financial flows to the developing countries in the next several years, while IMF projects a 3 per cent average annual rate of growth in industrial countries. A new debate on the nature and extent of development assistance has emerged in a number of countries that traditionally have been strong supporters of multilateral channels of aid, the outcome of which is not a foregone conclusion. Events in Central and Eastern Europe and the former Soviet Union have created additional demands for global resources, as has the dramatically increased number of emergencies. At the same time, the role of the United Nations system is being strengthened, particularly in the political and security areas, and concurrently being scrutinized to ensure efficiency and good governance.

264. There are important opportunities in this time of change and challenge. The political commitments made at the World Summit for Children are, if possible, of even more critical importance today, when rapid change provides the opportunity to make the principle of a "first call for children" a true governing principle at a time of dramatic social restructuring.

265. The broad advocacy by UNICEF for the principle of a "first call for children" will encompass adjustments in favour of human development in the national budgets and aid requests of developing countries, as well as adjustments in favour of children in both the domestic and international aid allocations of industrialized countries. The Programme Funding Office thus has the dual responsibility of fund-raising for UNICEF to reach the targets of the 1992-1995 financial plan and to encourage resource mobilization by external partners and allies such as the international financial institutions, bilateral donor agencies and NGOs in support of the goals for children and development in the 1990s. Regarding the former, the Programme Funding Office will develop and implement funding strategies for major government donors, with special priority given to those who are not making a financial contribution to UNICEF commensurate with their financial capacity.

266. UNICEF continues to advocate the review of official development assistance to favour children called for in the Summit Plan of Action. Important steps are being taken in discussing the statistical improvements needed to enable better monitoring of and allocations that benefit human development, in particular of children, through close collaboration between UNICEF, UNDP and OECD.

267. The year 1991 saw a decrease in contributions in United States dollars to general resources. Contributions from Governments to general resources in local currencies were higher than the expected medium-term plan, but lower than expected when converted to dollars. In 1991, general resources income was $506 million, $30 million less than the 1990 general resources income of $536 million. The decrease was due to exchange rate of exchange rate fluctuations, particularly the rise of the dollar in comparison to European currencies in 1991 (see paras. 308-311 below).

268. Supplementary funding contributions totalled $301 million, compared with the medium-term plan target of $303 million. It should be noted, however, that there was a dramatic shift in the relative allocation between regular supplementary-funded programmes and emergencies, in favour of the latter.

269. Sweden, the United States and Norway maintained their positions as the top three contributors to the organization. The Nordic countries continued to provide by far the largest contributions per capita: Norway, $12.82; Sweden, $12.12; Finland, $10.32; and Denmark, $6.32.

270. Progress was made in innovative fund-raising approaches, such as debt relief for children and cooperation with regional banks.

271. In the years ahead, greater involvement of field offices in the process of raising supplementary funds is expected.

272. A strategic planning exercise - the "country approach" - is being developed in cooperation with some National Committees and the Geneva Office in an effort to achieve the greatest possible coordination of external relations activities in industrialized countries. It is expected that this effort will show results in terms of greater contributions to UNICEF.

Greeting card and related operations

273. In 1992, GCO continued and built on its work covering the three income-generating areas assigned to it by the Executive Board: product sales and licensing; private sector fund-raising support to National Committees and field offices; and special fund-raising events and new initiatives. GCO is also responsible for coordinating exhibits and promotional activities.

274. During the 1990-1991 season, the general public world wide contributed $76.6 million to UNICEF general resources through GCO. This was $15 million higher than in the previous year. Sales volume rose to 154 million cards and indications are that the 1991-1992 season will continue the upward trend begun in 1985.

275. Once again, thanks are due to the world-wide network of National Committees for UNICEF, field offices and participating NGOs, which provides a powerful means of building grass-roots understanding and support for UNICEF work on behalf of children. Through the distribution of millions of brochures and mail pieces, the efforts of thousands of volunteers and the airing of hundreds of print and broadcast public service announcements, the name and work of UNICEF are made known to millions of people.

276. The year 1992 is expected to be one of renewed effort and growth for GCO, with special emphasis on assisting the newly privatized National Committees in Central and Eastern Europe and the establishment of private sector fund-raising capabilities in newly industrialized countries and in some developing countries. GCO is proposing a three-year, $1.5 million Central and Eastern European National Committees Development Programme and will continue to implement the Fund-raising Development Programme approved by the Executive Board in 1990.

Product sales

277. A brand management study was carried out in 1991 to set policies and directions for the use of the UNICEF name in its products, licensing, sponsorship and joint promotions. The study was conducted in close cooperation with National Committees and other UNICEF external relations divisions by an international consulting firm. Other developments included the further testing of new product lines and their adaptation to new markets; market surveys in a number of countries in Europe, Latin America and Asia; the continued application of stringent cost controls to move towards the

50 per cent profitability goals; and the computerization of production centres and field offices with major sales operations.

Private sector fund-raising

278. Active cooperation bwtween UNICEF and National Committees was enhanced through the biennial fund-raising workshop held in Spain during February, and a number of fund-raising working groups and other meetings. GCO is working closely with National Committees and field offices in Australia, Brazil, Greece, Ireland, the Republic of Korea, Japan, New Zealand, Poland, Portugal and Turkey to establish comprehensive direct mail programmes and fund-raising donor databases that can be depended upon to provide a steady source of income for UNICEF. This process is being supported by funding from the Fund-raising Development Programme.

279. Other fund-raising activities that yielded special benefits were pilot programmes using television programmes and spots to support direct mail fund-raising in Belgium, Brazil, France, Germany and the Netherlands; legacies and bequests programmes in the Netherlands, United Kingdom and the United States; and campaigns to obtain corporate support in Canada, Switzerland and the United States. The "Change for Good" programme for in-flight collections of foreign coins made advances owing to the participation of international carriers based in Australia, Hong Kong, Japan and the United States.

Special fund-raising events and new initiatives

280. The 1991 Danny Kaye International Children's Award presentation was held in the Netherlands in September, with support from the Division of Public Affairs. Children from 22 countries participated in the competition and performed alongside international celebrities such as Gregory Peck, Natalie Cole and Luciano Pavarotti. The show was made into a 90-minute television programme for broadcast in over 30 countries for the purpose of raising additional funds for UNICEF.

Exhibits and promotion

281. In 1991, GCO was involved in developing opportunities to raise public awareness of the needs of the world's children. Special exhibits were mounted at United Nations Headquarters and elsewhere on such topics as children in war, the achievement of UCI and the situation of the African child. In New York, the UNICEF House Visitors' Centre continued to draw school groups and other visitors.

282. Many countries now report using Facts for Life as part of their programme communication. In little more than two years since its publication in five languages, some 90 countries are using more than 3.5 million copies of this publication in well over 130 languages. Some two thirds of those countries have launched national editions, frequently adapting the format or adding new topics to match the messages more closely to socio-cultural particularities and national priorities. It is clear also that the natural role of Facts for

Life in basic "life skills" education - both formal and non-formal - has been recognized. Egypt has one of the more developed strategies, using Facts for Life with NGOs, writers, youth groups, market and rural women, health workers, nursing schools and university faculties of mass communication. In Mali, a protocol for the production of the booklet in local languages has been signed between UNICEF and a Malian organization.

Programming and programme management and support systems

283. Since its inception over 40 years ago, UNICEF has evolved an approach built on the twin pillars of analysis of needs and rapid and effective field-level response, using adaptive programming as a guiding principle. Over the years, UNICEF programming approaches have moved from a project to a programme approach, using national expertise, decentralized operations and decentralization of authority, and a combination of working at two levels: the national level for policy dialogue, advocacy for children and support for selected national goals; and the subnational level for experimentation and special attention to deprived, disadvantaged groups. The changes have occurred over time; developments in 1991 are described below.

Harmonization of programming and programme cycles

284. In response to General Assembly resolution 44/211, UNICEF has been working on a series of actions leading to the harmonization of programming and programme cycles with its JCGP partners, under the aegis of the Subgroup on Harmonization, chaired by UNICEF. It is now commonly agreed that harmonization of programmes should not be just a ritual, but a meaningful exercise; the consensus was reached that harmonization should be built around common objectives and goals. It was decided that, for the decade, poverty alleviation and human development should be the common goals for UNICEF and the other JCGP agencies.

285. Collaborative programming based on common purpose, shared objectives and complementarity of inputs, with mutually supportive consultation at different stages of programme development and implementation, is evolving as the best and most effective mechanism.

286. However, collaborative programming requires dialogue between agencies when programmes are at different stages of programming cycles. Synchronization and harmonization of programming cycles was therefore undertaken with UNDP and UNFPA, which have country programme cycles, and the involvement, as appropriate, of IFAD and WFP, which do not, as they have only projects. Such sychronization is also most effective when the programmes are synchronized around national development plans. It was found, however, that Governments have different approaches to the matter. Some prefer that United Nations programmes operate on the same cycle as national development plans, while others prefer United Nations programmes to be one year ahead so they can know what the inputs from the United Nations system are likely to be. Still others prefer the United Nations programme cycle to follow one year later so as to conform more strictly to national development plans that have already

been approved. UNICEF has to date planned according to the wishes of national Governments, using the mechanism of bridging programmes if a gap occurs between cycles.

287. In implementing the concept of synchronization and harmonization of programme cycles, it was found that country programmes fall into three groups. In the first group, the country programmes are already synchronized with all the agencies sharing the same cycle. In the second group, with adjustments made by the concerned agencies, the cycles could be synchronized. For example, UNICEF will thus be using bridging programmes of one or two years in Bangladesh and China, or shortening its cycle, as in Nepal, to be in conformity with other agencies. The third category consists of a group of countries where programmes cannot easily be synchronized because their programmes are more ad hoc in nature and emergency conditions do not permit normal country programming.

Programme terminology

288. At the moment, several terms used in programming convey different meanings to different organizations, partly because of the nature of operations and partly because of historical reasons. For example, "programme approach" and "national execution" have different meanings for different organizations. UNDP generally uses specialized agencies or its own office for project services for programme implementation, while UNICEF generally works directly with Governments or through NGOs. In order to have a common understanding, UNICEF has volunteered to prepare a study on programme terminology; a second draft is now under discussion in the JCGP Subgroup on Harmonization.

National execution and payments to government staff

289. While different understandings of the concept of national execution still need to be reconciled, all agencies have one common responsibility: the accountability for money entrusted to them by their governing bodies and by donors. In order to have a system that can be acceptable both to auditors and donors while retaining its efficiency, UNICEF is participating in a working group, chaired by UNDP, to harmonize accounting procedures. In many countries, both multilateral and bilateral agencies are often required to supplement the emoluments received by government staff who are working on projects or programmes of cooperation. This is often inevitable, as the salaries are totally inadequate or may go unpaid for several months. As a general rule, UNICEF has avoided salary supplementation as a working practice, but in many instances it has adopted a system of incentives based on productivity. In many countries, there has been an unhealthy competition between bilateral and multilateral agencies that create inequities and difficulties in operational practice. There is also gross inequity between those who are working on programmes of cooperation and those who are not. The subject is also related to civil service reform and salary structure, and UNICEF is participating in a working group chaired by UNDP to harmonize such practices among agencies.

Programming in situations of political change

290. During 1990 and 1991, many countries, especially in but not confined to Africa, underwent processes of political change, often with violent consequences and a breakdown of central governmental authority. In such cases, UNICEF has strengthened its already existing links with local authorities, which often continue to function. Local authorities are most often based on traditional community structures with their own mechanism of raising contributions or revenue for expenses. UNICEF has worked with these structures while encouraging and supporting community initiatives. It is interesting to note that the Bamako Initiative activities continue to function in several countries despite the breakdown of central authority. Many such community initiatives not only continue to function, but even to remunerate the district-level officials, as in Zaire, to supervise them and solve their problems for them. In such countries, UNICEF programming is designed to lead to structures and systems, which in any case will be required when peace and normal conditions return.

Country programme management plan

291. In 1990, UNICEF introduced a new coding and budgeting system called programme information data base that is structured around programmes with subordinate programme components (projects) and a hierarchy of objectives that serves as an entry point for a "management by objectives" approach to country programmes. Experience over the past two years of implementation has shown the programme information data base system to be conceptually sound, although it requires some refinement in the area of procedures and information system support. The system, by encouraging the allocation of programme budgets according to the objectives they aim to support, provides for greater clarity in the structure and purpose of country programmes. The introduction of the annual project plan of action, structured around annual milestone objectives and supporting activities, makes it possible to plan and monitor progress towards the project objectives. The project plans of action are becoming the primary management tool to monitor programme implementation and its impact.

292. The strengthening of programme conceptualization, better programme budget management and the availability of the project plan of action for monitoring implementation in all countries are significant achievements of the programme information data base. The next step is to improve the harmonization of programme structures, budgets and objectives with the office structures that support them. The concept of a country programme management plan was thus introduced. Through development of such a plan, offices presenting recommendations to the Executive Board will be able to analyse their programme objectives with a view to ensuring that they can be attained with existing or affordable human and financial resources, and that posts are rationally deployed.

293. Preparation of the plan is not yet mandatory, but in 1991, seven offices developing country programme recommendations in four regions volunteered to try this approach to programme management. The first year's experience with

the plan indicates that while much refinement is needed, the approach does allow for a greater articulation of the links between programmes and staffing than has previously been possible; as such, the plan is a direct input into the work of the Budget Planning and Review Committee, which is responsible for reviewing and recommending plans for efficient use of UNICEF human resources and administrative and programme support budgets.

294. Increasingly in the coming years, UNICEF office structures are expected to be more in harmony with the programme structures and objectives they exist to support. New methodologies will be tested to integrate further the "management by objectives" approach into the country offices and the annual project plans of action. A particular area of development will be the role and function of UNICEF sub-offices in planning and implementing large country programmes. In keeping with this approach, programming procedures will be streamlined, while at the same time rigorous standards of analysis and planning will be adhered to and the quality of UNICEF assistance enhanced.

Programme information

295. The challenges of the 1990s place a double demand on any UNICEF management information system built to meet the organization's requirements through the year 2000: first, the ability to monitor the goals for the decade as established by the World Summit for Children; and second, the ability to monitor progress towards the objectives included in the country programme of cooperation as well as the inputs (human, financial and material), outputs and activities supported by UNICEF.

296. In response to field office demand, the Field Office Country Information System is being developed to record data on the situation of children, including those related to monitoring the global goals. The system has been tested at Luanda, Maputo, and Santa Fe de Bogota, and is expected to be tested in other regions prior to its global release early in 1992. FOCIS will be complemented by a goals monitoring system (the data entry, enhancement and display system) being developed and tested by the Middle East and North Africa Regional Office.

297. To date, UNICEF has managed programme information at the country office level through the Global Field Support System. As significant as the contributions of the Global Field Support System have been, it has been recognized that country offices require a new, redesigned information system if they are to meet the increased demands on programme management in the 1990s. In November 1990, a global meeting was held at Nairobi, at which users from all regions and most headquarters divisions identified the objectives and salient features of the Programme Manager System, which will replace the Global Field Support System. Both field offices and headquarters divisions are actively participating in the development of the system, which is scheduled to be released in 1994. Regional management information system networks, pioneered by the Eastern and Southern Africa Regional Office, will ensure that field offices' needs are addressed; the networks will also serve as forums to share regional software development experience and initiatives

with a wider audience. In addition, many field offices have locally developed computer systems to meet their information needs. One example is the programme information management system developed in the Malawi country office, which enhances the existing programme capabilities of the Global Field Support System. Such computer systems are being reviewed for their possible contribution to the conceptual and functional development of the Programme Manager System.

Programme transport

298. UNICEF support to countries is in many ways unique because it comprises an entire range of activities ranging from policy dialogue, the generation and exchange of ideas and experience to technical cooperation, logistics and material support. In these programme support activities, transport is especially important in rural areas. As UNICEF support expanded in recent years, it became necessary to review UNICEF support to transport operations in the context of the implementation of UNICEF programmes of cooperation.

299. UNICEF asked the Joint Inspection Unit to undertake the review and the study was the subject of internal discussion in 1991. The current estimate of programme transport costs is now about 11 per cent of total expenditure. In view of this rather high percentage, steps are now being taken to reduce the proportion through a more stringent needs analysis, extending the life of vehicles and more prudent selection of the types of vehicles that are more appropriate to needs. Dialogue will be initiated with Governments so that the money saved can be used for other programme operations that need more support or even in the same programmes.

Donor reports

300. Under the existing system, UNICEF provides, generally on an annual basis, donor reports to the donors of supplementary-funded projects, together with financial reports of amounts spent and the plan of disbursements for the following years. While efforts are being made to improve the timely submission of good quality reports, there is room for significant improvements. Special attention is being given to this subject and it is hoped that further improvements can be seen from 1992.

Efficiency and effectiveness indicators

301. Beginning with the water supply and sanitation sector, UNICEF hopes to introduce efficiency and effectiveness indicators in all work sectors, as appropriate. The indicators will naturally vary by sector. In the water supply sector, it is estimated that the current operational rate of water-rig use in UNICEF is between 70 and 75 per cent, so that at any one time, between 70 and 75 per cent of drilling rigs will be in use. While the rate could not be 100 per cent because of necessary down time for maintenance and repair and rig movement, it could perhaps be raised to between 80 and 85 per cent. Similarly, the rates of functioning water points can also be closely monitored for efficiency. Such close monitoring will improve the efficiency of both rig use and water systems maintenance.

302. Similarly, the effectiveness of water supply will be measured not only by water availability, but also by its impact on health status. As a first step, water supply programmes will be sited not only in places where they are needed, but also where there are severe cases of dracunculiasis, trachoma or bilharzia, so as to contribute to the eradication or elimination of the diseases in the area. Water supply and sanitation efforts should, of course, contribute to CCD in all areas. Water supply and sanitation efforts should prove even more effective if they are better planned. Effectiveness will be also measured by the impact made on health status in a given area.

II. OPERATIONS

A. Overview

303. UNICEF programme goals and strategies for the 1990s, approved by the Executive Board in 1990, are now reflected in most country programmes and have placed great challenges on UNICEF support systems and operational capacity. In 1991, the UNICEF secretariat, together with the Executive Board, intensified efforts to review and strengthen the organization's operational capacity and accountability to meet those challenges in the most efficient, cost-effective and transparent manner. Those efforts were extensive in terms of the scope of issues and organizational commitments involved for both the short and long term.

304. In 1991, the Executive Board requested the Executive Director to conduct studies and analyses on specific operational issues and to submit reports to its 1992 session. In accordance with decision 1991/30 (E/ICEF/1991/15), the Bureau appointed a reference group and UNICEF assigned two staff members to act as coordinators. The coordinators assisted the reference group in conducting studies and analyses of the global, interregional and special-purpose funds; criteria for project versus core posts, particularly at headquarters; criteria and issues related to the reclassification of posts; and issues related to budget format, the medium-term plan and financial and income projections. To support the work of the reference group and the coordinators, an interdivisional task force, including selected participation by field offices, was established to conduct extensive reviews and discussions.

305. In decision 1991/27 (E/ICEF/1991/15), the Executive Board requested the secretariat to present a proposal for a cost-effective, long-term office space strategy for central headquarters. The result of those studies, analyses and/or proposals are presented to the 1992 Executive Board in a separate report (E/ICEF/1992/AB/L.9).

306. In addition to the actions related to Executive Board decisions, the secretariat also took various steps to strengthen its operational capacity in 1991. In the area of financial systems management, substantial progress was made to improve the central financial and accounting system. In July 1991, an interdivisional working group was established to review the existing framework of financial control and to make specific recommendations to improve further

financial accountability in the organization. Based on its initial reports, more detailed discussions and recommendations are now under consideration. In addition, as a result of the work of the special task force on non-supply assistance, a revised financial circular and field guidelines were issued to improve control and management of non-supply assistance, particularly advances to Governments.

307. In the area of human resources management, several new personnel policies and procedures were introduced in 1991 to improve administrative efficiency, support organizational priorities and improve working environments. Personnel management systems were enhanced in various ways, for example through the compilation of a directory of Professional staff profiles and the development of standard job descriptions and job titles in major functional areas. Recruitment and training activities were intensified to improve the human resource capacity of the growing organization.

B. Income and expenditure

308. For most of 1991, the value of the United States dollar was significantly higher than both the exchange rates used in the medium-term plan and actual 1990 exchange rates. As a result, although many countries increased their contributions in their local currencies, total UNICEF income in United States dollars for 1991 was less than estimated in the medium-term plan and less than in 1990.

309. Total income was $807 million in 1991. This was $51 million less than the $858 million total income estimated in the 1991 medium-term plan. Total income for 1991 was $14 million (2 per cent) less than total income in 1990.

310. The breakdown of sources of income is shown in table 7. In 1991, income from Governments, intergovernmental organizations and the United Nations accounted for 73 per cent of total income, the balance being non-governmental income.

311. General resources income in 1991 was $506 million, $49 million less than the amount estimated in the 1991 medium-term plan. As mentioned in paragraph 267 above, the shortfall was not the result of a reduction in donor support for UNICEF, but rather due to the effect of the high value of the United States dollar during the year. Contributions to general resources from Governments, in local currencies, were actually higher than expected in the medium-term plan, but lower than expected when translated into United States dollars. Had the value of the United States dollar remained at the medium-term plan levels, general resources income would have exceeded the plan by $7 million.

Figure I

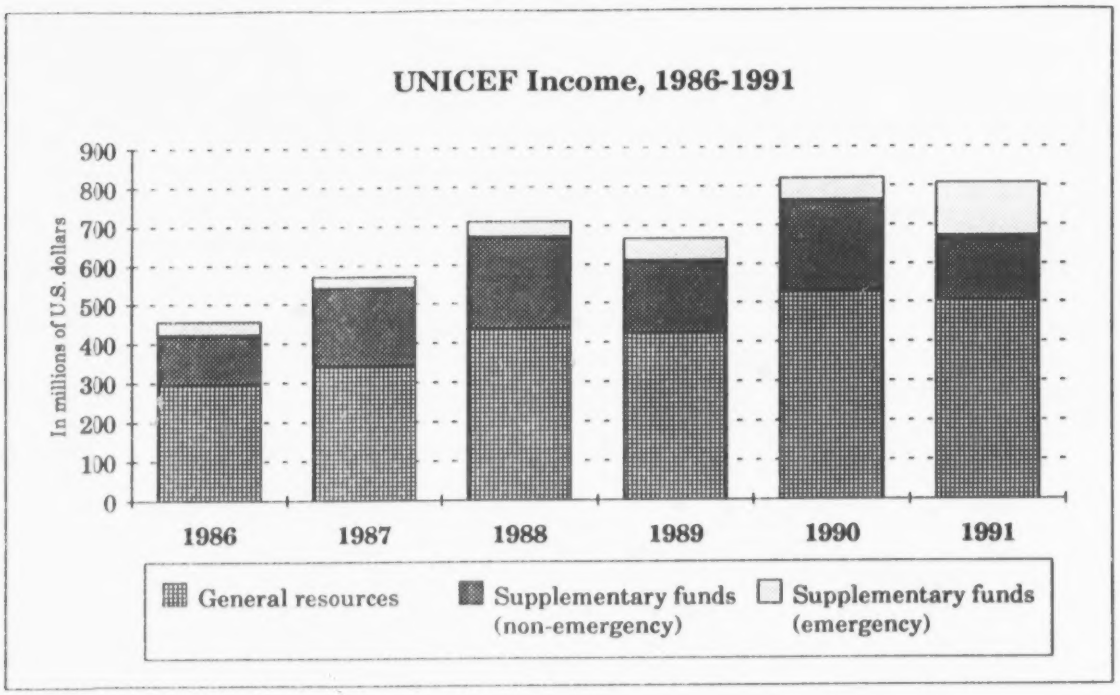

Figure II

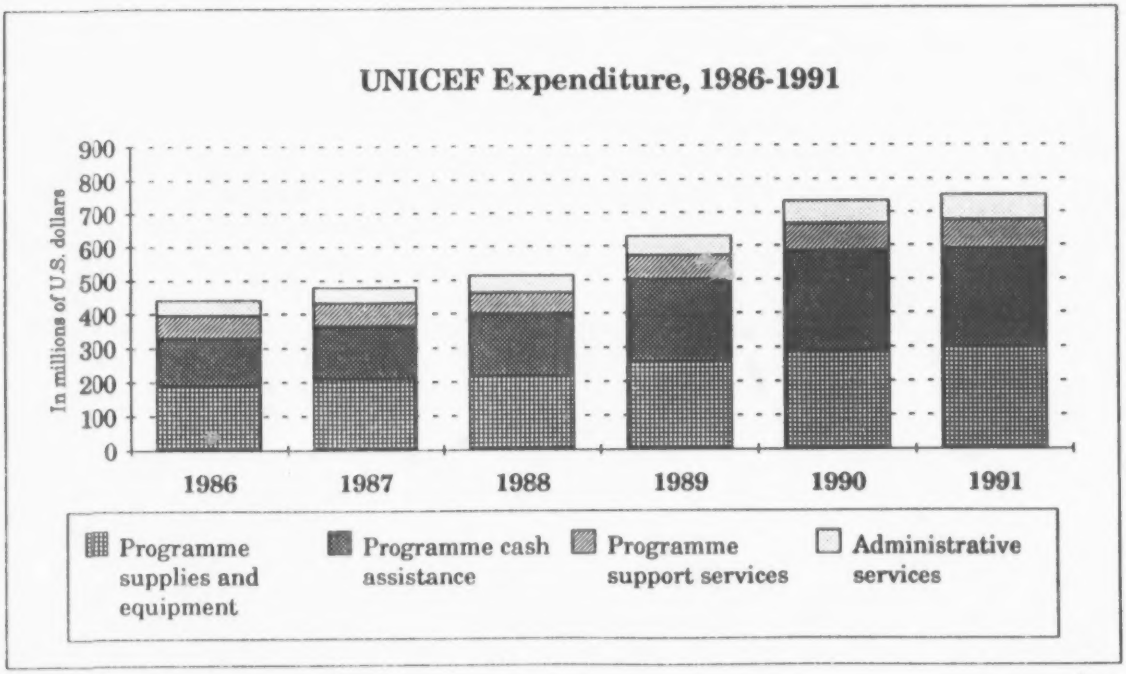

Figure III

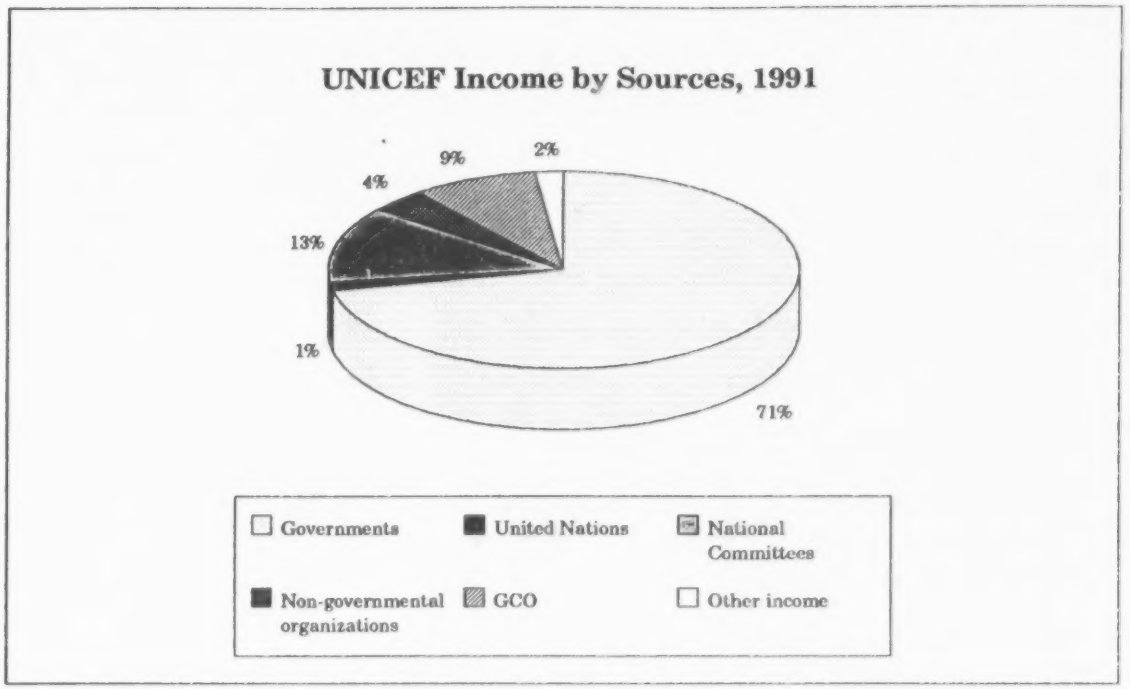

Figure IV

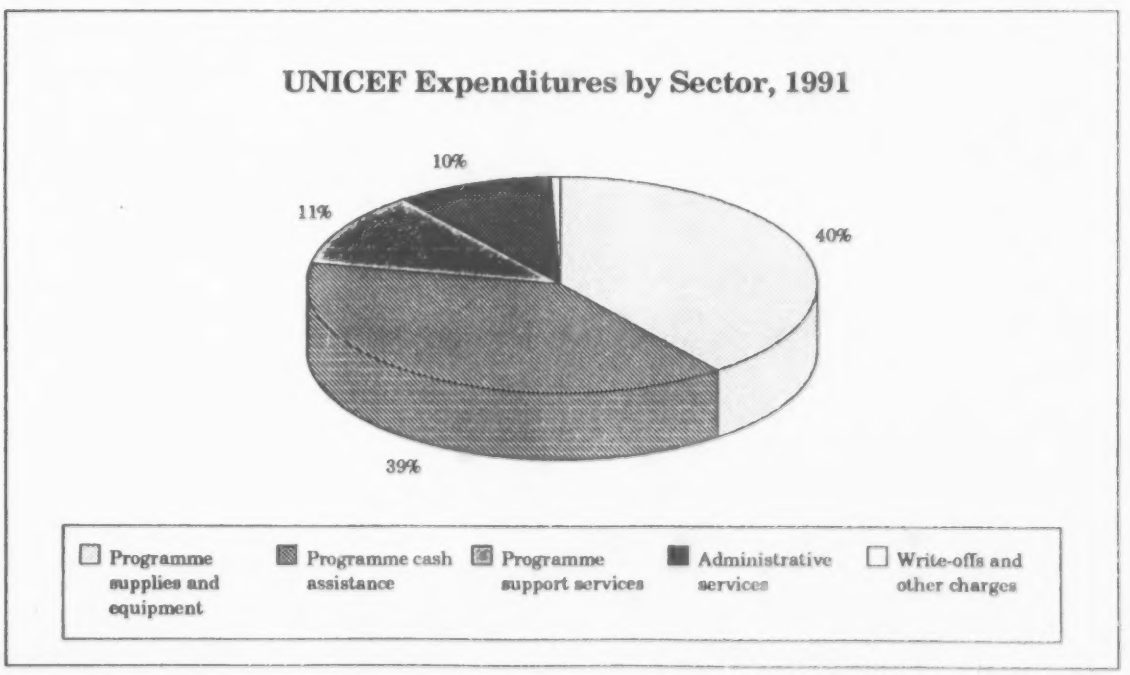

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Table 7. UNICEF income by source of funding

(In millions of United States dollars)

	1988	1989	1990	1991
General resources	437	423	531	506
Supplementary funds (non-emergency)	235	187	223	165
Subtotal	672	610	764	671
Emergency supplementary funds	39	57	57	136
Total	711	659	821	807

312. Total income from supplementary funds was $301 million in 1991. This was $2 million less than the medium-term plan, but $11 million greater than in 1990. Contributions to supplementary-funded emergency programmes were at an unprecedented high level in 1991. Supplementary-funds contributions for emergencies in 1991 were $136 million, which included $48 million for the appeal resulting from the situation between Iraq and Kuwait, $? million for the Sudan, $11 million for Liberia, $8 million for Ethiopia and $7 million each for Angola, Bangladesh and Somalia. On the other hand, non-emergency supplementary income was $165 million in 1991, which was $78 million less than the medium-term plan and $68 million less than in 1990.

313. In 1991, total expenditures were $755 million (see table 8). Programme expenditure for 1991 was $591 million, which was $89 million less than the 1991 medium-term plan amount. In 1991, supplies and equipment accounted for 50 per cent of total programme expenditure and cash assistance accounted for 50 per cent. Total programme expenditures for 1991 were $6 million (1 per cent) greater than in 1990. Budget expenditures for programme support services and administrative services in 1991 amounted to $161 million. Budget expenditures for the 1990-1991 biennium were $7 million less than the approved revised estimates.

314. The financial results for the biennium 1990-1991 are detailed in the UNICEF financial report and statements (E/ICEF/1992/AB/L.7). The financial medium-term plan provides financial projections for the period 1992-1995 (E/ICEF/1992/3).

Table 8. Expenditure by type of input

(In millions of United States dollars)

	1988	1989	1990	1991
Supplies and equipment	215	259	289	298
Cash assistance	185	242	296	293
Total programme expenditure	400	501	585	591
Programme support services	63	71	81	86
Administrative services	51	58	68	75
Total administrative expenditure	114	129	149	161
Write-offs and other charges	2	3	5	3
Total expenditure	516	633	739	755

C. Financial management

315. In 1991, the administration made continuous efforts to strengthen various aspects of UNICEF financial management and accountability.

Central financial and accounting system

316. In 1989, the Executive Board approved a three-year plan to improve and upgrade the central financial and accounting system at a total cost of $3.4 million (E/ICEF/1989/12, decision 1989/28). The final contractual obligations against this project were placed at the end of 1991. The total cost for the period 1989-1991 amounted to $3.2 million. Work relating to the final obligations will continue into 1992, and the project is expected to be completed at the end of 1992. A brief progress report of the system since its inception in 1989 is summarized below.

317. The project was managed by an interdivisional steering committee chaired by the Deputy Executive Director, Operations. The steering committee reviewed and approved work plans, including allocation of related budgets of the concerned divisions, and resolved any interdivisional issues that arose. An external management consultant firm was retained to advise on the overall management and coordination mechanisms of the project. The consultation helped to improve the quality of planning and coordination.

318. Work on the general ledger focused on improving the accounting functionality and integration of the different accounting-related systems. Additional systems were constructed to support donor reporting and to improve control of accounting entries originating from other systems in the organization. A new system of payroll accounting and an improved means of analysing incomplete accounting entries were developed. The system improvements have led to quicker and more accurate accounting information for financial and budgetary control and to improved reporting to donors.

319. A new contribution receivable system was developed to support the process of recognizing income and matching cash receipts against receivables. The system records pledges from the funding monitoring system and passes accounting entries to the general ledger. The new treasury system became operational in 1990 and interfaced to the general ledger. Based on a revised procedure for controlling programme budgets, a new programme budget system was developed. The system registers detailed country and global programme budget by source of funding, and controls implementation against programme budget allotments. A new funding monitoring system was developed to register pledges against unfunded supplementary-funded programmes and to the contribution receivable system to be recognized as income. The system is linked to the programme budget system so that pledges are translated into programme budget allotments.

320. A new travel system has been developed to support all activities from the initiation of a travel request to the settlement of the travel claim. Another system in the process of development will register and control consultant contracts. Both travel and contract control systems will check against budgets, feed electronic payment requests to the cashier's system and integrate with the general ledger.

321. A new personal finance system will be developed in 1992 to manage the registration and follow-up of various personal financial entitlements. The system will link with other systems to show recovery of advances and to record accounting entries in the general ledger.

322. A new procurement system has been developed at the Supply Division warehouse at Copenhagen to support all the steps of the procurement process: registration of requisition; purchase order generation; coding expenditures; shipping; and invoice certification. The system also controls the status of orders and produces statistical and other management reports. Work is in progress to revise the finance and accounting systems related to supplies. In New York, a new system for special accounts is also under consideration for development. Finally the integration of a personal computer-based administration budget control system with other central financial systems is planned for development in 1992.

323. Although a more definitive evaluation of the three-year central financial and accounting system project will be made after the project has been completed, the project has already greatly improved the integration of data processing in the financial and accounting areas. As a result, financial and

accounting data will be more accurate and be made available more promptly. An interdivisional review of the system project resulted in the realization that continuous system-related planning, design and implementation efforts will be needed to meet further the needs of the entire organization, in particular the programme management needs of the field offices.

Review of financial accountability in UNICEF

324. In recent years, UNICEF programme activities have grown very rapidly, supported by increasing levels of contributions from many donors. The receipt of such a significant increase of financial resources entails greater responsibilities on the part of UNICEF and an obligation to exercise proper management and control of activities and resources to ensure financial accountability and to achieve disciplined use of money, or "value for money".

325. To carry out those responsibilities, an interdivisional working group was established in 1991 to review the existing framework of financial control and to make recommendations to improve financial accountability and achievement of "value for money".

326. According to the review's tentative conclusions, there is a need: (a) to define more clearly external and internal accountability at the operational level; (b) to emphasize further the concept of "value for money" or disciplined use of financial resources; (c) to redefine or clarify lines of responsibility for financial authority and control; and (d) to establish or review relevant polices, regulations, rules, instructions and procedures. UNICEF will pursue measures in 1992 to improve financial accountability as an essential base for all its operations.

Other areas of specific focus

327. As the non-supply-assistance component of UNICEF programmes of cooperation has grown in recent years, the need for strengthening management and monitoring of cash assistance, in particular advances to Governments, has increased. Recognizing the importance of this issue, the Executive Director established a special task force on non-supply assistance which met in April 1991 for an intensive two-week discussion. The task force produced a series of recommendations to improve procedures and control of non-supply assistance. Based on these recommendations, the Comptroller issued a financial circular and detailed guidelines on the use of non-supply assistance to all field offices.

328. In addition, special emphasis was placed on the improved monitoring and control of programme expenditures and staff personal accounts in 1991. Intensive interdivisional discussions were undertaken and efforts made to address those two specific areas and various necessary measures were taken. Those efforts were also reflected in the work of the central financial and accounting system.

D. Human resource management

329. Strengthening UNICEF human resource capabilities is one of the critical operational areas in support of UNICEF country programmes and advocacy of goals and strategies for the 1990s. In the past year, the identification, recruitment, placement, training and orientation of new and existing staff members have been a primary concern of the organization. Concomitantly, much work has been done in assessing and, when necessary, restructuring work units to improve efficiency and effectiveness.

330. At 31 December 1991, UNICEF had a total of 5,116 staff members, comprising 1,201 international Professional (549 core, 588 non-core, 64 government-sponsored), 665 national Professional (186 core, 479 non-core) and 3,250 General Service staff (1,424 core, 1,826 non-core). These staff members were assigned to 223 locations globally in 112 countries, including headquarters, regional offices, country offices and sub-offices. The proportion of staff positions in the field now accounts for 84 per cent.

Personnel administration

331. Several new personnel policies and procedures were introduced in 1991 to improve administrative efficiency and conditions of service and to support organizational priorities. These included, inter alia, a policy for retention of benefits by core staff appointed to non-core posts; provision of contractual security for staff appointed to project posts with long-term funding; elimination of probationary appointments to simplify procedures; longer duration for staff on temporary employment, including short-term appointments and special service contracts; and new policies on part-time and flex-time employment in support of advocacy for creating a "baby-friendly" environment in UNICEF offices, as well as for allowing staff members to pursue studies relevant to their work.

332. With increased instability and continued deterioration in security situations in many parts of the world, much work was done in support of staff safety and security. The Division of Personnel worked together with the United Nations Security Coordinator's Office in extending support to field offices in these situations by providing practical advice whenever security situations arose, as well as by facilitating the orderly and timely emergency evacuation of staff and their families. By establishing clear lines of communication between field offices and specific security focal points, the Division of Personnel has established a positive and speedy response capability in such situations. UNICEF played a leading role within the United Nations common system to bring about improvements in the administration of security measures, including the revision and issuance of a new security handbook, special allowance for the families of staff members assigned to "non-family" duty stations, extending war-risk insurance to national staff and provision of residential security measures.

Personnel management systems

333. Although the UNICEF integrated personnel system has been computerized for some time, additional refinements and better linkages between various subsystems have continued. Their aim is to strengthen the management information system to enable the planning of short- and longer-term personnel needs in all parts of the organization. UNICEF capacity is being strengthened to forecast long-term personnel needs more accurately, both quantitatively and in terms of desirable patterns related to occupational functions, geographical areas, nationality and gender. Examples include the compilation of a directory of Professional staff profiles, the development of standard (generic) job descriptions in major functional areas and refining the coding of all occupational groupings and standardizing job titles. By the end of 1991, about one third of all international Professional staff had been incorporated into the computerized directory and some 45 generic job descriptions in eight main categories - programme management, external relations, administration, finance, personnel, water supply and sanitation, education and supply - had been developed and their levels classified.

Recruitment and placement

334. Responding to the organization's immediate and longer-term human resource needs, the identification, recruitment and placement of staff members have taken on increasing importance. Demand for recruitment services increased substantially in 1991 due to the number of new and upgraded posts, the need to strengthen capacity in specific functions such as education and AIDS, and the responses to emergency situations. Total recruitment actions increased from 289 in 1990 to 455 in 1991; of those, 301 were internal staff movements.

335. While unsolicited applications from external candidates continued to rise, much more pro-active and targeted recruitment has been undertaken to respond to organizational priorities, including reducing gender disparities, attaining parity between staff from industrial and developing countries in the international Professional category, and improving the nationality mix.

336. Having met the 1990 target of one third women in the Professional category, UNICEF has now set a higher goal of reaching a target of 40 per cent of women in that category by the end of 1994. This has given new impetus to recruitment actions, including more missions to recruit women candidates. As a result, 173 Professional female staff were appointed in 1991, representing 38 per cent of total appointments. Of the 154 external candidates recruited, 68, or 44 per cent, were women.

337. Recruitment missions were also organized to improve the proportion of staff from developing countries, increasing the number of staff from specific regions such as Africa or from underrepresented countries. With the new programme thrust in the area of education for all, some 44 new posts were established for the period 1991-1992. By the end of 1991, 33 staff members had been recruited to fill those posts and seven more were being processed.

Table 9. Professional staff members by gender and grade

(At 31 December 1991)

Grade level	International Professionals			All Professionals a/		
	Women (A)	Total (B)	Ratio (A)/(B) (%)	Women (A)	Total (B)	Ratio (A)/(B) (%)
ASG-USG	1	4	25.0	1	4	25.0
D1/L6-D2/L7	15	90	16.7	15	90	16.7
P/L/N 4-5	164	587	27.9	180	639	28.2
P/L/N 1-3	226	520	43.5	460	1 133	40.6
Total	406	1 201	33.8	656	1 866	35.2

a/ International Professionals (including Junior Professional Officers), plus National Professional Officers.

Training and orientation

338. To ensure that all staff have the highest levels of knowledge about UNICEF substantive policies and operational procedures, training and orientation activities have continued to grow and to be improved. The steady increase in the quantity of training was maintained and some 18 per cent more person-days of training took place during the first half of 1991 compared with the previous year. Also, improved procedures resulted in a reduction in unit cost per staff member trained. Good progress was made in training linked to the goals for the 1990s, particularly in the areas of nutrition, education, CDD, water supply and sanitation, safe motherhood, children in especially difficult circumstances and the rights of the child. In addition, training was organized in emergency management and a number of operational areas.

339. The policy of decentralized training through strengthened training of trainers, training focal points and regional training committees has enabled the Training Section to work more on the substantive areas of material development, testing of more effective methods, improved planning of training, provision of advice and support (such as the "Training Coach" newsletter) and evaluation. Orientation of new staff members is another rapidly expanding area which has covered a wide range of activities from briefing of new UNICEF representatives to orientation of General Service staff. Focus has been on ensuring more effective and rapid induction of new staff members in relation

to organizational policies and working methods, the operation of their respective work units and aspects related to staff members' individual jobs.

340. Procedures for evaluating the application of learning have been initiated but still need further work. The study leave programme continues to expand, albeit at a slow pace. UNICEF has played a significant role in inter-agency training through the Consultative Committee on Substantive Questions (Operations) and the Subcommittee on Training of the Consultative Committee on Administrative Questions.

E. Supply operations

341. UNICEF supply operations in 1991 accounted for 48 per cent of the dollar value of programme assistance. The Supply Division also provided procurement services to Governments, donors, NGOs and other United Nations agencies which complemented UNICEF programmes of assistance to the value of $48.9 million. All supply operations involve the Supply Division, whether related to procurement in developing countries, to supplies provided through the Supply Division warehouse at Copenhagen or to purchases for direct delivery from suppliers to field programmes.

342. During 1991, the redesign of the supply data processing systems continued. The purchase order generation and amendment systems were completed and new invoice certification and shipping systems installed. Development of the procurement bidding system was initiated. A steering committee was formed to guide or redesign the warehouse operating systems and the inventory management module. Hardware was upgraded to ensure the appropriate level of support to system users.

343. Since the announcement by the Secretary-General in December 1990 that coordinated procurement activities for the United Nations system would be introduced in Copenhagen, several meetings have occurred. The members of the Steering Committee, which consists of representatives of the United Nations Secretariat, UNICEF, UNDP and UNHCR, will review a proposal that is being developed to define the organizational and management structure required to initiate coordinated procurement. The members of the Advisory Committee on Administrative and Budgetary Questions plan to visit Copenhagen early in 1992 to familiarize themselves with the facilities and to discuss current developments.

344. Procurement in developing countries in 1991 was $89 million, based on the UNDP definition for developing countries. Total procurement in 1991 was $303.5 million compared with $302.6 million in 1990. The Supply Division will continue to ensure that both developing countries and under-utilized major donor countries have the possibility of participating in UNICEF contracts through the established procedures for international tendering.

345. The tender for vaccines issued during 1991 to establish prices for 1992 and 1993 resulted in significant price increases by some suppliers. Averaging the prices offered by the suppliers of each vaccine, the increases ranged from approximately 17 per cent for anti-tuberculosis vaccine to 55 per cent for oral poliomyelitis vaccine. The case of the basket of six UCI vaccines in the commonly provided vials rose by approximately 36 per cent over the 1991 average price. In dollar terms, the previously estimated $77 million worth of vaccine requirements for 1992 could cost an additional $16 million. However, the actual additional cost to the UCI programmes depends on the mix of vaccines requested, the mix of suppliers receiving purchase orders and the exchange rates in effect at the time of payment. Discussions are under way with suppliers in relation to the long-term implications of the price increases.

346. In 1989, the Government of Denmark agreed to finance the expansion of the administration buildings at Copenhagen. The new facilities, which are now completed and will be inaugurated in March 1992, will accommodate UNICEF staff and the UNDP Inter-Agency Procurement Services Office, which was relocated to Copenhagen in 1989.

347. Emergency shipments accounted for a large share of the Supply Division workload during 1991. Some 400 emergency orders valued at approximately $20 million were dispatched. The largest numbers of shipments were made to Iraq, Ethiopia and Liberia, but emergency deliveries were also made to 55 other countries.

348. With regard to Executive Board decision 1991/28 (E/ICEF/1991/15), particularly resolution 3 on reimbursable procurement income, it should be noted that in 1991 income exceeded expenditures by a margin sufficient to cover all costs and to replenish the reserve. In line with the resolution, interest income generated from procurement services will be credited to general resources from the biennium 1992-1993. Steps have been taken to ensure that estimated income from procurement services will continue to be sufficient to cover estimated costs of staff funded from this source and to ensure an adequate margin of over expenditures.

F. Administrative management services

349. The Office of Administrative Management provides administrative and legal guidance and support for UNICEF field offices, in addition to administrative management and travel services for New York headquarters.

350. In decision 1991/27 (E/ICEF/1991/15), the Executive Board requested the Executive Director to present in 1992 a proposal for a cost-effective, long-term office space strategy for central headquarters. In order to meet more efficiently the specific and rather complex requirements mentioned in the decision, an internationally well-known consultant firm was employed to conduct a thorough market survey study, focusing on the real estate market in New York City and its metropolitan area. Based upon the work of the

consultant, the secretariat's report and recommendation on headquarters accommodation are contained in a separate report to the Executive Board (E/ICEF/1992/AB/L.9).

351. As requested by the Board in decision 1991/34 (E/ICEF/1991/15), the Executive Director prepared a report on the Standard Basic Cooperation Agreement between UNICEF and Governments (E/ICEF/1992/L.1). A recommendation for a Standard Basic Cooperation Agreement is also before the 1992 Executive Board (E/ICEF/1992/L.2). Both documents were prepared in cooperation with the United Nations Office of Legal Affairs.

352. As part of its responsibility to carry out the JCGP decision about sharing common premises and services, the Field Services Section of the Office of Administrative Management provided technical, management and legal support to 25 field offices currently involved in construction of common premises with other United Nations agencies. The office also supported the construction of new UNICEF field offices, as well as assisted in the relocation, renovation, maintenance, administration and leasing arrangements of UNICEF real estate property and office premises world wide.

353. The Headquarters Services Section of the office provided administrative and management services to New York headquarters in relation to office space, procurement, maintenance and inventory control of headquarters equipment, supplies, mail and pouch, documents and reproduction services, maintenance and conference services.

354. A new computerized travel system was designed as a part of the central financial and accounting system and will be implemented shortly. The new system will provide management with data pertaining to travel and related costs and will expedite the monitoring of travel requests and their related budgets. In addition, the secretariat is optimistic that the system will facilitate the processing of travel arrangements. The Travel Services Section continued to provide services and counselling on routing, visas, United Nations laissez-passers, shipment of personal effects, insurance coverage and claims and negotiations with travel agents and preferred airline carriers.

355. The year 1991 saw an increased need to improve security for office premises and housing, particularly in Africa. As a result, the Office of Administrative Management has been working closely with the United Nations and UNDP to keep field offices abreast of the latest approved security measures.

G. Information resources management

356. A new version of the standard computerized field office system, to be implemented early in 1992, was prepared mainly to tighten automated financial controls. A project to develop the next generation of field office systems was initiated in 1991. It is designed to aid the function of field office programme management and to synchronize with headquarters systems and requirements. The conceptual stage of the work is being led by experienced UNICEF programme managers.

357. As part of the central financial and accounting system project described in paragraphs 316-323 above, major work in 1991 included completion of the travel system, interface between the treasury system and the general ledger, the bank information system, the payroll accounting system and the suspense account analysis system. Specification and design work has started on the remaining central financial and accounting systems and the whole project will be completed by the end of 1992.

358. General office automation has proceeded well, with almost all headquarters staff now connected to computing services. Training goals in basic office automation have been established and are being pursued.

H. Internal audit

359. The Office of Internal Audit reviews compliance with rules and regulations and the efficiency and effectiveness of UNICEF operations. Each year on a selective basis, a cross-section of operational and programme activities is reviewed in UNICEF offices.

360. Although the focus of audit interventions continues to be in the field, internal auditors are increasingly interacting at various New York headquarters levels. The outcome of audit findings are reviewed by the Internal Audit Committee, whose function was redirected in 1991 to perform the role expected of such a committee. The Committee is convened regularly four times a year.

361. In 1991, the auditors successfully assumed a secondary advisory role. Their experience and knowledge are therefore more frequently drawn upon in committees and task forces assigned for systems development and other management review tasks. The auditors have managed to make substantive contributions without compromising their independence.

362. The Office of Internal Audit and the Internal Audit Committee have taken a number of steps to ensure that auditees implement all audit recommendations promptly and fully. An executive directive was issued to this effect in 1991. The Office of Internal Audit has developed a constructive partnership with some of the regional offices to help field offices to comply effectively with audit observations. It is expected that this cooperation, now applied mainly in Africa, will be expanded to all regions in 1992 and will also be supported by New York headquarters divisions.